



Program Summary Checklist & Performance Request

This completed form, along with any supporting materials, should be submitted to: Programming Committee, c/o the Avon Free Public Library, 281 Country Club Rd., Avon CT 06001. Completed forms may also be dropped off at the library.

Name/title of program _____

Contact name, address, and phone number _____

Target audience _____ Length of program _____

Fee, if any, and Pay to the Order of...information for remittance

Optional cost to participants (book signings: cost to purchase book, if desired)

A list of other libraries where this program was held. If none, include previous performance references.

Equipment & space requirements. Include computer or internet access requirements.

Brief biography of program facilitator. Attach additional sheets and supporting materials as necessary. Parts of this material may be used in Press Releases to advertise the program. Please initial here if you authorize us to use the information you provide: _____

