



Programming Proposal Form

Presenter Information

Presenter Name:
(as it would appear on marketing materials)

Contact Name:

Current Address:

City: State: Zip Code:

Email: Website:

Target Audience:

<input type="checkbox"/> Children (0-5 years)	<input type="checkbox"/> Adult
<input type="checkbox"/> Children (5-12 years)	<input type="checkbox"/> Senior
<input type="checkbox"/> Teens (13-17 years)	<input type="checkbox"/> Intergenerational

Event Type:

<input type="checkbox"/> Author Talk/Reading	<input type="checkbox"/> Educational Workshop
<input type="checkbox"/> Film Screening	<input type="checkbox"/> Craft workshop
<input type="checkbox"/> Musical/Dramatic Performance	<input type="checkbox"/> Lecture/Panel Discussion
<input type="checkbox"/> Other:	

Length of Program: Most of our performers offer their services for free as a community service. Are you requesting an honorarium? If so, what amount?

Description of Your Program and/or Activities

Marketing Description

Please provide a 60-word (or less) statement that could potentially be used on marketing to describe your program/performance to the public.

References – Experience – Qualifications

Please provide a reference that has used your performance or is familiar with you professionally.

Name:

Phone Number:

Email:

How do you know this reference:

If no reference is available, list experience and qualifications to present this program:

Have you performed at the Dover Public Library before? If so, when?

- By checking this box, I certify that all of the information I have provided on this form is true and accurate.

Signature: _____ Date: _____

Applicants will be notified of the status of their proposal within six (6) weeks of submission.

35 Loockerman Plaza
Dover, DE 19901
302.736.7030
doverpubliclibrary.org

Official Use Only:

Date App. Received: _____

Approved/Declined: _____

Applicant Notified On: _____

Staff Initials: _____