



Hamilton Public Library Adult Program Application Form

Contact Information

Name:

Address:

City:

Postal Code:

Phone:

Email:

Program Information

Program Title:

Length of Program:

Can you present this program at multiple locations? Yes No

Program Description:

Programmer Bio:

Reference (i.e. from a past presentation):

Please include a detailed program description to help us move forward with this application. As a public institution, please note that presentations cannot include any form of solicitation. Thank you.

Signature: _____ Date: _____