AUTHORS BOOK SIGNING

September 14, 2021
6:00 pm

REGISTRATION DEADLINE:
July 31, 2021

Completed Applications Require ALL of the Following:

1. Author *must* be a member of ASALH
2. A completed Request Form (with additional pages if necessary).
3. Paid membership fee and paid additional processing fee of $50 are non-refundable.
4. A signed copy of the book(s) intended for sale at the Book-Signing Event.
5. All steps must be completed in order for your application to be processed.

AUTHOR INFORMATION WILL BE PRINTED EXACTLY AS PROVIDED

Prefix_____ First_____ M.I.____ Last _____ Suffix _____

Name of author as it appears on book _____

Address _____ City_____ State_____ Zip _____

Day ( ) _____ Evening ( ) _____ Mobile ( ) _____

Email _____ Website_____

Facebook _____ Twitter _____

Authors or their representatives are responsible for procuring, shipping and selling books for the event. ASALH is not responsible for any business transactions related to the sales of the books. ASALH reserves the right to reject books that are contrary to its scholarly mission and tradition. No books will be returned. Registration includes one-half of an eight-foot table. Registration does not include conference fees. Additional instructions will be sent to the email address that is provided above. I also agree to the use of my image and/or likeness by ASALH to promote the Author Signing Event.

I, (please print) _____ , agree to the terms as outline in this form.

Signature _____ Date _____

BOOK INFORMATION

Title:
_____

Brief Description:
_____
_____

Name of Publisher: _____ Please submit additional titles separately.

Method of Payment: ☐Check or Money Order ☐ Paid online at www.asalh.org **or** ☐ Information provided below for payment

☐Visa ☐MasterCard ☐AMEX CVV Code _____ (required) ☐ $50.00 Processing Fee ☐ $130 (includes $50 Processing Fee + General Membership)

☐ $110 (includes $50 Processing Fee + Associate Membership) ☐ $105 (includes $50 Processing Fee + Senior Membership - age 65 and older)

Card holder's name _____ Billing Address _____

Signature _____ Card number_____ Exp. Date_____/_____

For more information contact **exhibits@asalh.org** or visit **www.asalh.org/conference**.