



Memorial & Honor Book Program

LIBRARY USE ONLY

Name _____

Donor _____

Please note: To have a plaque placed in a book, donation of at least \$50 is required.

REQUIRED

Your Contact Information

Donation Amount

Name: _____

Email: _____

Address: _____

Phone: _____

REQUIRED

Honoree Information

- ☐ In memory of
☐ In honor of

Honoree's Name: _____

Donation presented by: _____

REQUIRED

Acknowledgement

Send acknowledgement to: _____

Address: _____

OPTIONAL

Donation Options

Material Age Level

Subjects preferred: _____

More information: _____

- ☐ Adult
☐ Young Adult
☐ Child
☐ Library Choice

Warren Public Library will do our best to fulfill your request within the parameters of our Collection Development Policy.

LIBRARY USE ONLY BELOW THIS LINE

Date Paid: _____

Staff: _____

Circle payment type:

Cash Check # ____ Credit Card Online

Announcement sent: _____

Acknowledgement sent: _____

Publicized date: _____

Date ordered: _____

Selection(s): _____