## IAAC FIRST ANNUAL LITERARY FESTIVAL

## OCTOBER, 2015 APPLICATION FORM

AUTHOR'S NAME:		
ADDRESS 1:		
ADDRESS 2:		
	STATE:	
COUNTRY:		
PHONE: (WORK)	(CELL)	_ (HOME)
EMAIL:	WEBSITE:	
PUBLISHER'S NAME:		
ADDRESS 1:		
PHONE: (WORK)	(CELL)	_ (HOME)
EMAIL:	WEBSITE:	
NAME/TITLE OF BOOK:		
ADDRESS 2:		
CITY:	STATE:	
ZIP:	COUNTRY:	
AUTHOR'S BIOGRAPHY (A	PLEASE LIMIT TO 200 WORE	OS):

SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):		
	SYNOPSIS: (PLEASE LIMIT TO 200 WORDS):	

## ADDITIONAL REQUIREMENTS:

\* AUTHORS PHOTOGRAPH

- \* IMAGE OF BOOK JACKET
- \* PREVIEWS/REVIEWS
- \* 2 COPIES OF THE BOOK

ALL MATERIALS MUST BE POSTMARKED OR DELIVERED TO THE IAAC AT THE ADDRESS

BELOW BY **JULY 31, 2015**:

- \* COMPLETED APPLICATION FORM
- \* ADDITIONAL REQUIREMENTS
- \* APPLICATION FEE \$20

REGISTRATION FEE MAY BE THROUGH PAY PAL (USING ANY CREDIT CARD) CLICK HERE >>OR VIA CHEQUE TO THE ADDRESS BELOW.

## INDO-AMERICAN ARTS COUNCIL LITERARY FESTIVAL 2015

517EAST 87TH STREET, SUITE 1B

NEW YORK, NY 10128

PHONE: 212 594 3685

EMAIL: LITERARY.IAAC@GMAIL.COM; ADMIN@IAAC.US

WEBSITE: WWWW.IAAC.US