

# Read Local Submission Form



Please fill out as many sections of the form below as possible.

Please advise staff if you require assistance using this form, or if an alternative version is required. You can reach Information Services at 905-623-7322 x2712

## Contact Information:

Name:

Phone number:

Email:

CLMA Library Card Number:

## Item Information:

Title:

Author:

ISBN:

## Please provide a brief description of the work:

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## What are the major subjects of the work?

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Where has your work been reviewed? Please provide the title of the publication, date of review, and page number or URL. Please feel free to attach a copy of the review(s) to this document.

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- I have read and accepted the Clarington Public Library, Museums & Archive's Collections and Material Selection Policy and read the Read Local Collection Guidelines for Submission.

**Date:**

**Signature:**

**Please forward one copy of work and a completed copy of this form to:**

**ATTN: Collections Librarian  
Newcastle Branch, Clarington Public Library, Museums & Archives  
150 King Ave. E., ON L1B 1H5**

Information on this form is collected under the authority of the Public Libraries Act 1990 and is used for the purposes of Library services and planning. Please direct any inquiries to CLMA Administration, 163 Church Street, Bowmanville ON L1C 1T7, 905-623-7322.