

2017 Book Club Contact Details

Name of the group: _____

Co-ordinator's Name: _____

Co-ordinator's Postal Address: _____

_____ Postcode _____

Co-ordinator's Phone: _____

Co-ordinator's Mobile: _____

Co-ordinator's Email: _____

When do you meet? (eg second Tues of the month) _____

How many people are in your group? _____

How do you receive your books?

By mail (if by mail, delivery address) _____

By pick up

By arrangement

Will you select your books by (please tick)

Contacting the Book Club as required

Reserving several books at one time (ie provide a wish list of books you would like to borrow over a series of months). If so, please fill in your choices overleaf.

Book group Name.....

Meeting Date

Requested Book & Author

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NB. Every effort will be made to supply you with the books requested for the time indicated. However if the book has been booked by another book group, it will be made available to you at the next possible time. If no other time is available for a particular book, please choose from our three alternative choices below:

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