



StoryTubes 2009 National Contest Partner Library Application Form

Thank you for taking time to consider partnering with us to help kids tell other kids about books. If any parts of this form raise questions for you, please use the contact information included at the end of the application form. Applications will be considered in the order in which they are received.

Library: _____ Population Served: _____
Address: _____

Why does the StoryTubes Contest interest you? As this contest crosses boundaries between traditional library departments, please consider an answer that reflects this.

Tell us about a local partnership you've developed with another organization that serves children or teens:

What ideas do you have for developing local or regional interest in the contest?

Relate a favorite compliment you've received on your library's services.

Optional: You may attach a statement of support by your library director or other library administrator.

By completing this section, each representative indicates that he/she is familiar with the StoryTubes contest and will support the contest within his/her area of expertise.

Primary Contact, Youth/Teen Services: _____

Job Title: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

Secondary Contact, Youth/Teen Services: _____

Job Title: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

Primary Contact, IT/Web Services: _____

Job Title: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

Primary Contact, Marketing/PR: _____

Job Title: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

Other Contact: _____

Job Title: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

Send application to:

Faith Brautigam

Director of Youth Services

Phone: (847) 429-5970

Fax: (847) 608-5099

fbrautigam@gailborden.info

For further information:

Denise Raleigh

Director of Marketing, Development & Communications

(847) 429-5981

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