

# Acton Memorial Library Book Group Form

Please return this completed form to the Circulation Desk, or email to: [actcirc@minlib.net](mailto:actcirc@minlib.net)

## 1. REQUEST BOOKS FOR YOUR BOOK GROUP

Name of book group: \_\_\_\_\_

Contact person's name: \_\_\_\_\_

Contact person's telephone or email address: \_\_\_\_\_

Is your book group open to new members (please reply "yes" or "no") \_\_\_\_\_

Please list the books you would like to request and the dates of the book discussion meetings:

Date of book discussion meeting	Author/Title	Number of copies needed	Special requirements? (Large Print, etc.)

Please continue to page 2.

## 2. TELL US WHETHER TO LIST YOUR BOOK GROUP ON OUR WEB SITE

If you would like the library to include information on your group on the library's "Book Group" web page, please fill out the form below. All of the information you provide will be publicly available on our website. This option is only available to groups that are open to new members.

Name of book group:

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Contact information:

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Description of book group:

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Do you want us to include the dates and titles of the books to be discussed, as you provided Part 1 of this form? (Please reply "Yes" or "No") \_\_\_\_\_