



2019 Bookapalooza Program STATEMENT OF COMMITMENT

I understand the criteria for the ALSC Bookapalooza Program and verify all information I have provided. I also understand that the winner of the Bookapalooza Program is entirely responsible for the shipping charges of the entire collection, and I have identified the means to ship the entire collection to our premises. If unable to complete this commitment within one month of notification, I understand that the collection will be awarded to the applicant with the next highest rated application. I understand that the collection is shipped as a whole and will consist of materials in a wide variety of formats, and targeted to various reading/age levels.

SIGNATURE OF CONTACT PERSON COMPLETING THE FORM

Date:

SIGNATURE OF DIRECTOR/ADMINISTRATOR

Date:

NAME AND TITLE OF DIRECTOR/ADMINISTRATOR (PLEASE PRINT)

Send a scanned copy of this form to the chair of the ALSC Grants Administration Committee, Ariana Hussain, at ariana.sani@gmail.com.