

Hometown Novel Writers Patron Application

Name: _____

Email: _____ Phone: _____

Address: _____

City: _____ State: ___ Zip: _____

Website (Optional): _____

Please select desired patron level:

() Annual Patron, \$25.00 per year () Lifetime Legacy Patron, \$100.00

Are you a writer? Yes No If yes, mark all that apply:

Unpublished/Aspiring/Self-published /Traditionally Published /Hybrid Published/Journalist

Other _____

Fiction/Nonfiction/Memoir/Articles/Short Stories Genre: _____

What do you hope to get from membership in Hometown Novel Nights? (Check all that apply.)

Exposure to more readers

Book sales opportunities

Networking with other authors

Improving my craft of writing

Other _____

Are you interested in a leadership role or serving on a committee to help improve the HNWA experience for other authors? Yes No

Are you interested in serving on an author panel or giving a workshop? Yes No

What special skills do you have? (Check all that apply.)

Communications/Social Media

Networking

Event Planning

Public Speaking

Graphic Arts

Other _____

How did you learn about Hometown Novel Writers?

Referral from _____

Attended an event

Social Media

Website

Corner Arts Gallery

Other: _____

Email your application to mike@hometownnovel.com or deliver to any HNWA Board member. We will confirm acceptance of your application by email. Send your payment to HNWA's PayPal/Venmo account c/o hometownnovel@hotmail.com. Or, mail your payment by check to HNWA, 19 Spring Street, Newnan, GA 30263. THANK YOU!