



# Public Program Proposal

Lucius E. and Elsie C. Burch, Jr. Library  
501 Poplar View Parkway, Collierville, TN 38017  
Phone: 901-457-2600 | Fax: 901-854-5893

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Programming at the Lucius E. and Elsie C. Burch, Jr. Library is designed to provide the community with informational, cultural, and educational opportunities that encourage lifelong learning. If you would like to present a program at the library, please fill out the proposal form below. We will contact you if the program meets our guidelines [[See our Programming Policy](#)] and fits with our schedule and budget. Please note that the library plans and promotes programs four to six months prior to the event date. We will review all proposals and contact you if we are able to accommodate your proposed program.

## Please Answer All Questions

Full Name: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Website URL: \_\_\_\_\_

## Program Description

Presenter's Name: \_\_\_\_\_

Presenter's Background and Credentials:

Title of Program: \_\_\_\_\_

Preferred Date(s) & Time(s): \_\_\_\_\_

*Programs must be held during normal library hours. See <https://www.colliervilletn.gov/residents/library/about-us/contact-us>*

Description of the proposed program:

Most lectures, readings, and performances are done on a volunteer basis. Does your program require a fee?

Mark only one: Yes:  No:

If yes, what amount are you requesting? \_\_\_\_\_

Program's Target Audience(s): \_\_\_\_\_

*Adults, seniors, children (specify ages: 0 to 5, 6 to 8, or 9 to 12), teens, college students, other)*

What is the minimum enrollment needed for the program to be held? \_\_\_\_\_

What is the maximum enrollment for the program? \_\_\_\_\_

### **Additional Information**

What supplies, equipment, and/or staff support would be needed, if any?

Do you have a PowerPoint presentation?

Mark only one: Yes:  No:

Any additional information?

**I confirm I have read the Collierville Burch Library's policy on programming.**

See <https://www.colliervilletn.gov/home/showdocument?id=5560>

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If completing electronically, please type your name to sign.*