

StoryWalk® Sponsor Form

For Office Use:
Date Received:
Paid:
Recorded:
Initials

Please note that the library will not accept donations of actual materials as part of this program.

See back for more details.

Your Name:					Phone #:			
Address:				Date:				
DONATION INFOR	RMATION							
Donation Amount	: \$100	Your Re	lationshi	p to Hor	oree:			
Please circle the m	nonths you w	ould prefe	er. We w	ill contac	ct you regardi	ng availability.		
l would prefer:	January	February		March	n Apri	l May	June	
	July	August	Septe	mber	October	November	December	
Gift Message								
Gift message to be	displayed at th	e beginnin	g of the S	toryWalk	® and on a ce	rtificate for your	honoree.	
Please indicate how						·		
		Prese	nted to t	he Wam	ego Public Lil	brary		

in celebration of (Honoree Name) ______
from (Donor Name) _____

About the StoryWalk® Sponsor Program

Thank you for your interest in the Wamego Public Library's StoryWalk® Sponsor Program

Celebrate a birthday, holiday, or a special milestone through the library's StoryWalk® Sponsor Program. It's easy, fun, and your donation is tax deductible.

The library can supply, upon request, suggestions of titles for consideration by the donor.

StoryWalk® Sponsor Policy

StoryWalk® donations are accepted to purchase new titles for the Wamego Public Library StoryWalk®. While the library will not accept the donation of books, materials, or objects for use at the StoryWalk®, financial contributions may be directed toward favorite subject areas. The library staff can supply, upon request, suggestions of titles for consideration by the donor.

All gifts and materials become the property of the Wamego Public Library and the library reserves the right to dispose of them as it deems appropriate. Donated materials are subject to the same withdrawal criteria of all other library materials.



