



Local Author Collection

Mission Statement

The mission of the Local Author Collection is to connect the community that we serve with the works of local authors. We will:

- Provide free access to books by local authors
- Enrich the community with books written by local authors
- Promote individual achievement in authorship

Local Author Submission Guidelines

- Local authors must reside in Hidalgo County.
- Local authors must have a valid library card from a library in the HCLS System.
- Local authors must be age 16 and older.
- Book submissions must be for an adult or teen audience.
- Book submissions must be donated, and will not be purchased by the library.
- Book submissions must be in hardcover or trade paperback formats.
- Book submissions will be reviewed by a selection committee using the following criteria:
 - Presentation and readability, including use of correct spelling and grammar
 - Priority will be given to books with content directly pertaining to the Rio Grande Valley
- All books will be reviewed, and authors notified by email within 60 days of submission. If your book is accepted, you will receive further instructions. If your book is not accepted, it can be picked up from the library.
- Decisions made by the selection committee are final.
- Please allow up to 90 days from acceptance for the book to be processed for the Local Author Collection.
- **The author represents and warrants full ownership and/or legal rights to publish all material in this book, including artwork.**

Local Author Collection: Submission Form

The author of the submitted title is required to fill out and sign this form for the book to be considered for the Local Author Collection.

Author Name:	Publisher:
Book Title:	Publication Date:
ISBN:	Illustrator (if applicable):
<input type="checkbox"/> Adult <input type="checkbox"/> Teens/ Young Adult	<input type="checkbox"/> Fiction <input type="checkbox"/> Nonfiction <input type="checkbox"/> Mystery <input type="checkbox"/> Science Fiction <input type="checkbox"/> Poetry <input type="checkbox"/> Drama <input type="checkbox"/> Short Stories <input type="checkbox"/> Biography/Autobiography
Library Card:	Phone Number:
Address:	
Email address:	

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I have read, understand, and agree to submit my book according to the stated guidelines.

Author Signature _____ Date: _____

Submit this form and a donated copy of your book to: Reference Department, McAllen Public Library, 4001 N. 23rd St., McAllen, TX, 78504.