



ImagineWe, LLC

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Phone: (716) 201 - 6304

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Website: www.ImagineWeLLC.com

Application Information - To be completed by applicant

Name: _____ **Birthdate:** ____/____/____
Last First Middle Initial Month Day Year

Address: _____
Street (Apt) City/State Zip

Contact Information: (____)____-____ (____)____-____ _____
Home Telephone Mobile Phone Email Address

-How did you learn about our company?-

Name of Book? _____ **Author of Book?** _____

Anticipated Release Date: _____

Will you be providing your own illustrations? (Check) YES NO

If yes, What is their name? _____

You will need to provide written evidence that they have released publishing rights to ImagineWe, LLC as well. Please Place initial that you understand: _____

Have you emailed a full color sample to the email address displayed above? (Check) YES NO

** if you have not yet emailed your sample to the email address above, please do so as soon as possible, as your application will not be valid until you do. **Please Place initial that you understand:** _____

As a new company, ImagineWe will also need it's authors to market their books as well to bring the most publicity. Please Place initial that you understand: _____

Will this book be part of a Series? (Check) YES NO

Please tell us about your book?

Please tell us a little about you as an Author?

ImagineWe, LLC (ImagineWe) is an equal opportunity employer. This company does not discriminate on the basis of race, sex, color, religion, national origin, sexual orientation, age, disability, veteran status, or any other factors made unlawful under applicable federal and state laws. All personnel decisions are made without prejudice or discrimination, in accordance with the principles of equal opportunity.

THANKS AGAIN FOR APPLYING TO JOIN THE IMAGINEWE TEAM!