



# Application for Membership SELF-PUBLISHED AUTHORS

Please print, fill out, and mail this application to The Writers' Union of Canada, 600-460 Richmond Street West, Toronto, ON, M5V 1Y1.  
\* **indicates required information** (Please note that optional information is collected for statistical purposes only. It does not affect your application in any way and will not be shared with a third party.) All membership decisions are made in confidence.

## APPLICANT INFORMATION

MR.  MRS.  MISS  MS.

\*NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

PEN NAME(S) \_\_\_\_\_

\*STREET ADDRESS \_\_\_\_\_ STREET ADDRESS B \_\_\_\_\_

\*CITY \_\_\_\_\_ \*PROVINCE \_\_\_\_\_ \*POSTAL CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

\*HOME PHONE \_\_\_\_\_ EMAIL: \_\_\_\_\_

WEBSITE \_\_\_\_\_

\*CITIZENSHIP (Please check)

Canadian

Permanent Resident in Canada

I identify myself as an Indigenous person (First Nations, Inuit, Métis) person born or resident within Canada.  
Annual membership is \$50.

## BOOK FOR CONSIDERATION

*Tell us about your book. Please note that only fields with an asterisk (\*) are mandatory. However, support materials provide valuable information when assessing your application, and you are encouraged to include anything you feel is pertinent. Applicants' books must successfully demonstrate commercial intent and professionalism in all areas, including editing and design.*

\*BOOK TITLE \_\_\_\_\_

\*FORMAT:  EBOOK  PHYSICAL BOOK \*GENRE \_\_\_\_\_ \*PAGE COUNT \_\_\_\_\_

\*PUBLISHED THROUGH/PRINTED BY \_\_\_\_\_

\*PUBLICATION DATE: \_\_\_\_\_

Is there any additional information you would like to add to your application (e.g. expertise in a field, writing honours, or awards)?

\_\_\_\_\_  
\_\_\_\_\_

*You must submit either an electronic copy of your book (EPUB or PDF format) to [twuc@writersunion.ca](mailto:twuc@writersunion.ca) or send **four print copies** of it along with your application.*

## PROFESSIONALISM

Did you use a professional:

EDITOR (name, professional affiliation, website): \_\_\_\_\_

DESIGNER (name, professional affiliation, website): \_\_\_\_\_

\*REGISTRATIONS (check all that apply)

ISBN (Number: \_\_\_\_\_)  Access Copyright  Public Lending Right

CIP (Number: \_\_\_\_\_)

## COMMERCIAL INTENT

Did you use a professional:

PUBLICIST (name, professional affiliation, website): \_\_\_\_\_  
\_\_\_\_\_

\*DISTRIBUTION CHANNELS (Check all that apply and specify the names of services used.)

EBOOK PLATFORMS \_\_\_\_\_

ONLINE PRINT-ON-DEMAND SERVICE \_\_\_\_\_

AUTHOR-OWNED OR THIRD PARTY WEBSITE \_\_\_\_\_

BOOKSTORES \_\_\_\_\_

EVENT(S) \_\_\_\_\_

\*MARKETING (Please describe the different ways that you have marketed your book. You may also enclose a detailed marketing plan.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MARKETING PLAN ATTACHED

\*AUTHOR'S ONLINE MEDIA PRESENCE (Please provide any links to social media accounts, eg. Website, Facebook, Goodreads, Twitter, Instagram, etc., used to promote your books.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## INCOME/FUNDING

\*BOOK PRICE \_\_\_\_\_ \*SALES TO DATE \_\_\_\_\_

\*NUMBER OF UNITS SOLD (specify electronic and hard copy) \_\_\_\_\_

Please provide sources of funding, if applicable, or other forms of payment to you as author of the book. Example (but not limited to) crowdsourcing, reading or speaking fees, sponsorships, grants).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PAYMENT

INTRODUCTORY MEMBERSHIP IS \$100 (REGULAR ANNUAL MEMBERSHIP IS \$205). MEMBERSHIP FOR INDIGENOUS PERSONS IS \$50.  
ALL APPLICATIONS INCLUDE A 50% NON-REFUNDABLE ADMINISTRATIVE FEE.

CHEQUE ENCLOSED

PLEASE CHARGE MY VISA/MASTERCARD

VISA/MASTERCARD CARD NO.

\_\_\_\_\_

EXPIRY DATE \_\_\_\_\_

SECURITY CODE \_\_\_\_\_