

REGISTRATION FORM - TYPHLO & TACTUS (T&T) 2017
to be completed for each book entered

*AUTHORS SHALL SEND THEIR ENTRY
AT THE DATE FIXED BY THEIR NATIONAL T&T CONTACT POINT.*

1. To be completed for **original books especially made for visually-impaired children:**

Title:

Author(s) of the text:

Creator(s) of the tactile illustrations (if different from the above):

2. To be completed for **tactile adaptations of commercially-published books:**

Publisher:

ISBN:

Copyright date:

Original title:

Original author:

Original illustrator:

Name of the producer of the tactile version:

Tel:

Email:

3. **Name and address to which the book should be returned:**

Name:

Address:

4. **Legal representative of the book** (person or organization to be named as the copyright owner if the book is published):

Name:

Address:

Email:

Tel:

I declare that this has been tested by visually-impaired children. I give my permission for the organizers to exhibit my book (all pages) in a variety of contexts and to quote from it and reproduce photos of it for Typhlo & Tactus publicity purposes.

Signed:

Date:

Place:

Send the Registration Form along with each book to your national T&T contact.