



APPLICATION

Brooklyn Writers Space, LLC

Mail this form with your résumé to:

Brooklyn Writers Space
58 Garfield Place, Ground Floor
Brooklyn, NY 11215
Fax: 718-504-4316

Brooklyn Writers Space, LLC (BWS) is a membership organization. Any writer with a serious writing project may be considered for admission. Prior publication is not a requirement.

Date: _____

First Name: _____

Last Name: _____

Home Address: _____

E-Mail: _____

Phone: _____

(Day/Evening)

How did you hear about BWS? _____

Check the membership you prefer below:

- Full-Time (24 hrs) \$330/Quarter
- Part-Time (6PM to 6AM on weekdays; all day on weekends) \$200/Quarter
- Part-Time 2 (3:30PM to 6AM on weekdays; anytime on weekends) \$235/Quarter

(Note: There is a one-time \$65 initiation fee and a refundable \$20 key deposit.)

Professional References:

Name: _____

Phone: _____

Name: _____

Phone: _____

Name: _____

Phone: _____

Description of Current Project(s): _____

Published Works: _____

Residencies, Fellowships, Grants, etc: _____

If this application is approved, I understand that the privileges may be cancelled if the rules and regulations governing Brooklyn Writers Space, LLC (BWS) are not adhered to and, upon notice from BWS, I agree to forfeit my membership, keys or other evidence of admission.

I further agree not to hold BWS responsible for loss of, or damage to, any books, notes, clothing, computers, drafts, or other property belonging to me.

Signature: _____

Date: _____

58 GARFIELD PLACE...GROUND FLOOR...BROOKLYN,NY...11215...718,788,2697