

**MYSTERY WRITERS OF AMERICA  
New York Chapter  
2023 MENTOR PROGRAM APPLICATION**

NAME (and Pen Name if any) \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

I confirm that I am a paid-up member of MWA-NY (Check box) ☐

**RELEASE**

I acknowledge that I have requested a mentor from the New York chapter of Mystery Writers of America to review my manuscript entitled \_\_\_\_\_ and provide editorial and publishing advice regarding the manuscript. In connection therewith, I hereby release Mystery Writers of America, its employees, agents, and representatives, and the reviewer from all claims, suits, and damages related to or arising from this review and the advice provided, including but not limited to any claim of copyright infringement or use of intellectual property.

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DATE: \_\_\_\_\_

MAIL COMPLETED FORM AND A \$25 CHECK PAYABLE TO MWA-NY TO:

ALBERT TUCHER (ATTN: MWA-NY MENTOR PROGRAM)  
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