



AkASL Membership Registration/Renewal Form

(Membership runs from July 1 through June 30th of each year.)

Be sure to RENEW for the current school year!

Make checks payable to: **AkASL** Please print out this form and **mail form and check to:**
Deborah Mulcahy, PO Box 671846, Chugiak, AK 99567

For more information, email Deb Mulcahy (Membership Chair): mulcahydeb@hotmail.com

Please write in the amount of your membership:

\$ _____ **ACTIVE MEMBERSHIP (\$20)** Alaskan school librarians who currently teach, direct, or supervise in the field of school library information services.

\$ _____ **ASSOCIATE MEMBERSHIP (\$10)** For those who are actively promoting and advancing school library programs. Includes individuals in clerical positions, and those who are retired or from out of state.

\$ _____ **COMMERCIAL MEMBERSHIP (\$40)** Organizations & businesses that wish to receive the Puffin, Battle of the Books mailings, & other Association information.

Total amount: \$ _____

Please complete the information below:

First Name, MI, Last Name: _____

Address (street): _____

City, State, Zip: _____

Home phone / Work phone: _____ / _____

School or Business: _____

Work Address: _____

Fax# / Email address: _____ / _____

Title, position, etc. _____

School District: _____

I am currently a member of (Circle those that apply): Region: (Northern(1) / Western(2) / SouthCentral(3) / SouthEastern(4)) **If you are not sure what region you are in check the website at <http://www.akla.org/akasl/assoc/regions.html>**

I am currently a member of (circle those that apply): AASL AK Library Assn ALA

I plan to go to one of the following national conferences:

AASL ALA Midwinter ALA AASL Fall Forum

(Office use only)

Date: _____ \$Pd _____ Ck# _____ DB entered _____ Recpt. sent _____