



AkASL Membership Registration/Renewal Form

Membership runs yearly, from October 1 - September 30

Be sure to RENEW for the current school year!

Print and fill out form. Make check payable to AkASL. Mail form and check to:

Membership, PO Box 101085, Anchorage, AK 99510-1085

Or join/renew online: akasl.org/join

For more information, email AkASL Membership Chair: akasl.membership@gmail.com

Please write in the amount of your membership:

\$ _____ **ACTIVE MEMBERSHIP (\$25)** 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 join the listserv, receive Battle of the Books and other Association information.

Total amount: \$ _____ Thank you for joining!

Please complete the information below:

First Name, MI, Last Name: _____

Address (street): _____

City, State, Zip: _____

Home phone: _____ Work Phone: _____

School or Business: _____

Work Address: _____

Email address: _____

Title, position, etc. _____

School District: _____

I work in Region (circle one): If you are not sure what region you are in, check the website at akasl.org/join/regions

Region 1/Northern Region 2/Southcentral Region 3/Anchorage Region 4/Southeast

I am currently a member of (circle): AASL AkLA ALA Other _____

I plan to go to one of the following national conference(s) (circle):

AASL AASL Fall Forum ALA ALA Midwinter ISTE

(Office use only)

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