

2015-2017 Share the Wealth Membership Campaign

Share your commitment to the school library profession by participating in AASL's Share the Wealth membership recruitment campaign. By recruiting your colleagues to AASL, you are contributing to the development and growth of your association. A growing AASL means greater recognition for school librarians in the K-12 community, more resources and support for members, and a larger network dedicated to transforming learning.

AASL members who refer a colleague will be entered into:

- Monthly drawing (in the month the application is received) for a complimentary AASL membership—over \$100 value
- Grand prize drawing for complimentary AASL 18th National Conference registration, airfare to conference, and three-night hotel stay in Phoenix, AZ (one entry for each referral received)—\$1,500 value

For more information, give us a call or visit us on the web:

800-545-2433 ext. 4382
TDD 888-814-7692
www.ala.org/aasl/STW



personal membership acceptance form

Date _____

Name _____
PREFIX FIRST MIDDLE LAST SUFFIX

Title _____ Place of Employment _____

Address _____

CITY STATE ZIP COUNTRY

Work Phone _____ Home Phone _____

Toll Free # _____ Fax _____

E-mail _____

Home Address _____

CITY STATE ZIP COUNTRY

Send ALA mail to Home Work **Send ALA billings to** Home Work

Please allow 4-8 weeks for initial receipt of publications.

From time to time, ALA rents its membership lists to select organizations offering services or products related to libraries and educational organizations. If you DO NOT wish to be included in these mailings please check the appropriate box(es). NO MAIL listing NO E-MAIL listing

Personal Membership Categories:

- \$118** I want to join AASL/ALA for the FIRST TIME
- \$154** Renew SECOND YEAR ALA membership and ADD AASL
- \$187** Renew THIRD YEAR ALA membership and ADD AASL
- \$99** I am a library support staff person employed in library and information services or related activities
- \$84** I am employed full- or part-time in library service related activities at a salary of less than \$30,000 per annum, or I am unemployed
- \$84** I am retired

- \$71** I am a student enrolled in a library science program (5 year limit)
- \$50** I am already an ALA personal member and want to join AASL
Membership Number _____
Valid Through _____

Sections & Special Interest Groups:

- Educators of School Librarians (ESLS)
- Independent Schools (ISS)
- Supervisors (SPVS)
- Student SIG
- Retiree SIG

Method of Payment:

- Check enclosed (payable to ALA) Purchase order enclosed VISA MasterCard AmEx
- Account / PO # _____ Expiration Date _____
- Name/Contact _____ Signature _____
- Phone _____ E-mail _____

Your membership will be effective for one year following the receipt of dues.

Referred by _____
NAME EMAIL

Membership in the American Library Association is required for membership in the American Association of School Librarians. In order for your reference to receive credit for this referral your membership form must be returned to AASL (not ALA) for tracking.

Mail, Fax, or E-mail application to:

American Association of School Librarians, 50 E. Huron St., Chicago, IL 60611-2795
Fax 312-280-5276 | E-mail aasl@ala.org