ASCLA Online Professional Development Course Registration
Group Registration Form

A minimum of 2 participants in the same course from the same library or library system constitute a group. Check, money order, purchase order or credit card must accompany registration to reserve space in this course. Mail or fax your registration form with payment to the address below. Fax registrations are accepted for credit card and purchase orders only.

American Library Association, ATTN: MACS, Online CE Registration
50 E. Huron Street Chicago, Illinois 60611 (312) 280-1538 fax

Questions? Contact Membership and Customer Services (MACS) at (800) 545-2433.
Any cancellations must be received in writing ALA/MACS department by the latest registration deadline listed online and are subject to a $35 per student processing fee. Refunds will be processed two weeks after the start of the course.
ASCLA reserves the right to cancel a course or workshop for reasons including insufficient numbers of students.

REGISTRATION FORM
Please complete the following with legible print writing.

Course Name: ___________________________ Session Dates: _________

Org. Name: ___________________________ ORG. ALA MEMBER ID: _________
Address: ____________________________________________________________
________________________________________________________
City: ________ State: ______ Zip: ______

Preferred Mailing, if other than organizational address
Address: ____________________________________________________________
________________________________________________________
City: ________ State: ______ Zip: ______

Phone: (___)______-_______ (Work) (___)______-_______ (Home) (___)______-_______
Fax: (___)______-_______ E-mail: ____________________________

The following information must be completed for each student enrolling in the course. A minimum of 2 students must register in order to receive the 15% savings.

Member No: _________ ASCLA member? Yes □ No □
Name: ___________________________ E-mail: ___________________________
Title: ___________________________ Phone number (work preferred): (___)______-

Fee: Select one
____ $110 (ASCLA Member) _____ $149 (ALA member) _____ $178 (Nonmember) _____ $85 (Student/Retired)
If student, name of accredited library school: ___________________________

Member No: _________ ASCLA member? Yes □ No □
Name: ___________________________ E-mail: ___________________________
Title: ___________________________ Phone number (work preferred): (___)______-

Fee: Select one
____ $110 (ASCLA Member) _____ $149 (ALA member) _____ $178 (Nonmember) _____ $85 (Student/Retired)
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________________________________________________________________________________________

Page # ___ of ___
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Member No: __________  ASCLA member? Yes □  No □
Name: __________________________  E-mail: __________________
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Fee: Select one
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If student, name of accredited library school: __________________
Where did you hear about this course?  

- [ ] Email  
- [ ] Web  
- [ ] AL Direct  
- [ ] Other (specify): ____________________________

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<th>Rate</th>
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<th>Subtotals</th>
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<td>$85 (Student/Retired)</td>
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**Total Registration Cost:**

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**Payment Method:** *Place a check mark in appropriate box*

- [ ] Check or Money Order (payable to the American Library Association)
- [ ] Purchase Order (include a copy of the order with this form)

For credit card & purchase orders, please complete the following:

- [ ] VISA  
  Card/P.O. Number: ____________________________  Exp: _____/_____
- [ ] Master Card
  Name on Card/P.O.: ____________________________
- [ ] American Express
  Credit Card Security No.: ______________

Signature: __________________________________________