ASGCLA Online Course Registration

Use this registration form to register by mail or fax. Check, money order, purchase order or credit card must accompany registration to reserve space in his course. Mail or fax you 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
225 N. Michigan Ave, Suite 1300
Chicago, Illinois 60601
(312) 280-1538 fax

Questions? Contact Membership and Customer Services (MACS) at (800) 545-2433, option 5. Any requests for cancellation of registration must be received in writing ALA/MACS department by the latest registration deadline listed online and are subject to a $40 processing fee. Refunds will be processed two weeks after the start of the course. ASGCLA 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: ______________________________ Course Start Date: _________
Name: ______________________________ ALA MEMBER ID: _________
Address: ______________________________ City: ______________ State: ____ Zip: _________
________________________________________
Preferred Mailing, if other than organizational address
Address: ______________________________
________________________________________
City: ______________ State: ____ Zip: _________
Phone: (______)_______-_______ (Work) (______)_______-_______ (Home) (______)_______-_______
Fax: (______)_______-_______
E-mail: _________________________________
________________________________________
________________________________________
Where did you hear about this course? Email Web AL Direct Other (specify): ______________________
________________________________________
________________________________________
Registration Fee **: Select One

_______ $175 (ALA member)

_______ $210 (Nonmember)

_______ $100 Student/Retired member of ALA

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:
Circled one: VISA Master Card American Express
Card/P.O. Number: ______________________ Exp: _____/_____
Name on Card/P.O.: ______________________
Credit Card Security No.: ______________________
Signature: ______________________________