

RUSA 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 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 Learning Registration
50 E. Huron Street
Chicago, Illinois 60611
(312) 280-1538 fax

Questions? Contact ALA 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 \$35 processing fee. Refunds will be processed two weeks after the start of the course. RUSA reserves the right to cancel a course or workshop for reasons including insufficient numbers of students.

INDIVIDUAL REGISTRATION FORM

Please complete the following by clicking inside the gray box and typing in your information; or print out and complete with legible print writing. Looking for the group registration form? Visit www.ala.org/rusa and click "Online Learning" in the left navigation menus.

Course Name: _____ Course Start Date: _____

Member No: _____

Name: _____

Title: _____

Org. Name: _____

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): _____

[continued]

Registration Fee:** Select one

\$130 (RUSA Member) \$175 (ALA member)

\$210 (Nonmember) \$100 (Student/Retired member of ALA)

***RUSA's Health Information 101 course offers IACET CEUs. Please add \$20 to each registration rate if enrolling in this course.*

Payment Method: *Place a check mark next to appropriate choice*

Check or Money Order (payable to the American Library Association)

Purchase Order (include a copy of the order with this form)

Credit Card

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

Circle one: *VISA Master Card American Express*

Card/P.O. Number: _____ Exp: ____/____

Name on Card/P.O.: _____

Credit Card Security No.: _____

Signature: _____