YALSA Webinar 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 CE Registration
50 E. Huron Street
Chicago, Illinois 60611
(312) 280-1538 fax

Questions? Contact Membership and Customer Services (MACS) at (800) 545-2433 ext. 5

Any cancellations 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. YALSA reserves the right to cancel a course or workshop for reasons including insufficient numbers of students.

REGISTRATION FORM

Please complete the following form by typing in your information or with legible print writing.

Webinar Name: ______________________________

Mailing Address: ________________________________________________________________

Member Number: ______________________________

First Name: ______________________________  Last Name: ______________________________

Org. Name: ________________________________________________

Address: ________________________________________________

City: __________ State: ___  Zip: __________

Phone: (____)_______-_______ (Work) (____)_______-_______ (Home) (____)_______-_______

Fax: (____)_______-_______

E-mail: _______________________________

Preferred mailing, if other than organizational address

Address: ________________________________________________

City: __________ State: ___  Zip: __________

Registration Fee: Select one

_____ $29 (student, support staff)  _____ $39 (YALSA Member)  _____ $49 (non-YALSA member)  _____ $195 (group rate)

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: ____/____

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