

Manitoba Library Association Membership Form

Individual Membership

New Membership Renewal

Name:		Date:	
Library/Institution:			
Mailing Address:			
City:		Province:	Postal Code:
Phone:		Email:	
<p>Please identify if you are (select one):</p> <p> <input type="checkbox"/> library student <input type="checkbox"/> working/worked in libraries <input type="checkbox"/> library vendor/supplier <input type="checkbox"/> library trustee/board member <input type="checkbox"/> other (please explain): _____ </p>			
<p>Electronic Contact Consent</p> <p>In order to comply with anti-spam legislation (CASL), the MLA requires your consent to contact you via email. Please indicate whether or not you would like to receive electronic updates. Such messages may include information about newsletters, upcoming events, and other details relevant to the Manitoba library community</p> <p> <input type="checkbox"/> YES I give my consent to receive electronic messages from the MLA <input type="checkbox"/> NO I do NOT give my consent to receive electronic messages from the MLA </p>			
<p>Please select a membership payment below:</p> <p> <input type="checkbox"/> Student, unemployed or retired (L1) \$10 <input type="checkbox"/> Annual salary under \$50 000 (L2) \$30 <input type="checkbox"/> Annual salary over \$50 000 (L3) \$50 </p>			
Division: (optional)	<input type="checkbox"/> None	<input type="checkbox"/> Trustees	<input type="checkbox"/> Technicians
<p>Consent to Value Statement and Code of Conduct</p> <p>I understand that this is an application for membership and my membership may not be accepted. I have also read, understand, and agree to abide by the terms of the Manitoba Library Association's Value Statement and Code of Conduct.</p> <p> <input type="checkbox"/> YES I consent to MLA's Value Statement and Code of Conduct. <input type="checkbox"/> NO I do NOT consent to MLA's Value Statement and Code of Conduct. </p>			



Donation *(Income tax receipts will be issued for donations over \$10)*

Manitoba Library Association \$ _____

Prison Library Committee \$ _____

To donate to the Scholarship Fund, please send a cheque to the Winnipeg Foundation www.wpgfdn.org

Payment:

Total payment submitted: \$ _____

Cheque or money order payable to "Manitoba Library Association".

Please Mail Form and Payment to:

Manitoba Library Association
606-100 Arthur Street, Winnipeg MB R3B 1H3

Office Use Only

Membership expiry date: _____ Receipt Issued: _____ Updated in Membership File: _____