



Membership Application form

Name of Applicant:

(If institutional membership , personal representative)

Name of Institution:

Address:

Email:

I do not wish to subscribe to the IALL Member list serve

Please check membership type:

- Student membership (US\$ 20)
 Personal membership (US\$ 60)
 Institutional membership (US\$ 95)

Please pay by:

Check of Draft (in US\$ drawn on a US bank):

I am enclosing a check for US\$ payable to International Association of Law Libraries.

OR

Credit Card (to be collected in US\$)

Card type: Visa MasterCard

Name on card:

Card number:

Expiration date: (MM/YY)

Amount in US\$

Date:

Fill out, print and sign this application form, then send it by mail, fax or email to:

(Ms.) Xinh Luu, IALL Treasurer
International Association of Law Libraries
(c/o University of Virginia Law Library)
580 Massie Rd.
Charlottesville, VA 22903 USA

Fax: (+1) 434-982-2232

Email: XLUU@virginia.edu

Signature: _____