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| http://hlabc.chla-absc.ca/wp-content/uploads/2016/04/logo_sm.png Membership FormMembership cycle: June 1 - May 31 |
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| Name |  |
| Title |  |
| Institution |  |
| Address |  |
| Phone |  |
| Email |  |
| Website |  |

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| **If you are a new member or would like to update your contact information,** please enter your address / contact information as you would like it to appear in our membership directory. The membership directory is stored in the members-only part of our website. |
| We’re looking for members to fill some HLABC roles. Are you interested in:

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| * serving on the executive
* planning continuing education events
* helping with the newsletter
 | * helping to arrange social meetings
* other:
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Are you a member of the Canadian Health Libraries Association: € Yes € No |

**Membership Category:**

* $30 Regular membership dues
* Free! First year of a Student membership
* $20 Student membership dues beyond the first year [max 2 yrs]

**Payment options:**

* Cheque enclosed, payable to HLABC
* Paypal payment made via PayPal button at <http://hlabc.chla-absc.ca/membership/join-hlabc/>

**Receipt Needed?**

* Yes
* No

**To mail this form:** mail to the HLABC Treasurer whose current address is listed at the bottom of this page: <http://hlabc.chla-absc.ca/membership/join-hlabc/>

**To email this form:** send to hlabcexec@gmail.com