

Organizational Membership Application

Email Completed Application to: registrations@dclamiami.org

DCLA Membership is based on the current fiscal year, covering September 1st to August 31st.

					Org	anizat	ion I	nforma	ation						
Organization Name															
Address															
City, State, Zip											Cou	nty		-	
					(Contact	t Info	ormatio	on						
Contac	t Name														
Phone		()					Email	Address						
Job Title										l					
Work Mailing A	Address														
City, Sta	ate, Zip														
Registration Type:	□ Ne	w Me	mbers	ship	□м	ember	ship	Renew	al						
Organization Type: Academi		ic 🗆 Public 🗆 Sch			nool 🗆 Special			☐ Library School/Pro			gram	□ Ne	twork/Cons	sortia	
						Memb	ersh	ір Тур	е						
Membership for libro	aries, con	sortia,	netwo	rk, coo _l	perative	s, and li	ibrary	school /	s/degree p	orogran	ıs is bas	ed on n	umber o	f employees.	
✓		Number of Employees			Dues per Employee			Discount							
			5 - 24			\$ 10.00			25% savings on individual n			membe	berships		
			25 - 49			\$ 8.00			50% savings on individual membershi			erships	Compared to Individual		
		50 - 249			\$ 6.00			62.5% savings on individual member			berships	Membership Dues of \$16.00.			
			250 or more			\$ 4.00			75% savings on individual members			erships	\$10.00.		
Enter Number of		f Employees:			X \$			= Total Membership Dues: \$			\$		I		
			_												
						Pay	men	t Type	/pe						
					□ P	ayPal 🗆 (Check						
			Send PayPal Payments to: registrations@dclamiami.org												
					<u>re</u>	gistratio	ns@c	<u>iciamian</u>	ıı.org						
								ayments							
		DCLA c/o Angel Hernandez Miami Dade College, North Campus Library													
			11380 NW 27th AVE, Ro							У					
	Miami, FL 3316														
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Signature of A	uthorized	d Orgai	nizatio	n Repr	esentati	 ve				-				 Date	
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Printed Name	and Job	Title								_			Phone N	lumber	