

## Individual Membership Application Colorado Association of Libraries (CAL)

Memberships are valid for a full year from the day you join.

The Colorado Association of Libraries (CAL) is the common bond, voice, and power for the library community. We are united to advocate for quality library services, support access to information, and foster the professional development of our members.

## What we do:

Pursue legislative initiatives
 Support intellectual freedom
 Offer professional development
 Provide continuing education opportunities
 Network with librarians and civic leaders

Name:			□ New Member □ Renewing
Title:			
Organization:			Courier Code:
Mailing Address:			
			Fax:
Phone:	Email:		Referred by:
Personal Membership Dues			Please select any of the following you would like noted on
ANNUAL SALARY	DU	ES PRICE	your CAL Membership Record.
☐ Over \$90,000	:	\$150.00	Associations
<b>560,000 - \$90,000</b>	!	\$120.00	☐ School Libraries Assn. (CASL) ☐ Public Libraries Assn. (CoPLA)
<b>□</b> \$40,000 - \$59,999	9	\$ 95.00	Academic Libraries Assn. (CoALA)
<b>□</b> \$20,000 - \$39,999	9	\$ 70.00	☐ Special Libraries Assn. (CoASL)
☐ Under \$19,999	9	\$ 45.00	.,
☐ Library Trustee	:	\$ 45.00	Divisions
☐ Retired	:	\$ 35.00	☐ Paralibrarian
☐ Full-time Library School Stude	ent :	\$ 30.00	Library Technology Division
Name of advisor:			☐ Technical Services & Automation (TSAD) ☐ Trustees & Friends
Advisor Phone:			D Hustees a Friends
Advisor Email:			Interest Groups
☐ *Unemployed (limited to 1 ye)	ar)	\$ 20.00	☐ Business Services
			☐ Children and Teen Services
Voluntary Contributions			☐ Colorado REFORMA
☐ Legislative activities \$		\$	☐ eResources Interest Group ☐ International Exchange
☐ CLEF (help fund continuing education			☐ New Professionals Interest Group (NPIG)
		\$	☐ Readers' Advisory
☐ Paralibrarian Conference Stip		\$	☐ Special Populations and Issues
☐ Julie J. Boucher Memorial Fun		\$	
Grand Total: \$		\$	☐ Advocacy Task Force
			Committees - Please see listing on web site
☐ Visa ☐ MasterCard ☐ Check			www.cal-webs.org and indicate your interest by writing
Card Number:			that committee(s) name here:
Exp. Date: CVV Code:or Check#:			
Signature:			
Exact Billing Address:			