



NYLA Round Table Leadership Registration Form

Please complete the following details for your group's representative for each committee. Please note that all representatives must be current NYLA members.

Round Table: _____

President
Name:
Company:
E-mail:

Treasurer
Name:
Address:
E-mail:

Vice President
Name:
Company:
E-mail:

Other Officer
Name:
Company:
E-mail:

Other Officer
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Company:
E-mail:

Web Editor
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Communications Representative
Rep Name:
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Submitted by: _____

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