



SCLA Personal Membership Application / Renewal

Name: _____
 Home Address: _____
 City: _____
 State: _____ Zip+4 _____
 Phone: () _____
 E-mail: _____

Organization: _____
 Work Address: _____
 City: _____
 State: _____ Zip+4 _____
 Phone: () _____
 FAX: () _____

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|------------------------------|--------------------------------------|---|---|
| I would like to join: | <input type="checkbox"/> SCLA | <input type="checkbox"/> NYLA & SCLA | <input type="checkbox"/> Add SCLA to my NYLA Associate Membership* |
|------------------------------|--------------------------------------|---|---|

| Please Select the Appropriate Dues Category: | | | |
|---|---|-------------|-----------|
| Membership Type | SCLA Only | NYLA & SCLA | Associate |
| <input type="checkbox"/> Regular (Select Based on Income Level) | | | |
| <input type="checkbox"/> Up to \$19,999 | \$15.00 | \$45.00 | \$14.00 |
| <input type="checkbox"/> \$20,000 to \$29,999 | \$25.00 | \$76.00 | \$23.00 |
| <input type="checkbox"/> \$30,000 to \$39,999 | \$35.00 | \$103.00 | \$32.00 |
| <input type="checkbox"/> \$40,000 to \$49,999 | \$45.00 | \$130.00 | \$41.00 |
| <input type="checkbox"/> \$50,000 and Over | \$55.00 | \$162.00 | \$50.00 |
| <input type="checkbox"/> First Time (Select Based on Income Level) | | | |
| <input type="checkbox"/> Up to \$19,999 | \$15.00 | \$40.00 | \$14.00 |
| <input type="checkbox"/> \$20,000 to \$29,999 | \$25.00 | \$50.00 | \$23.00 |
| <input type="checkbox"/> \$30,000 to \$39,999 | \$35.00 | \$60.00 | \$32.00 |
| <input type="checkbox"/> \$40,000 to \$49,999 | \$45.00 | \$70.00 | \$41.00 |
| <input type="checkbox"/> \$50,000 and Over | \$55.00 | \$80.00 | \$50.00 |
| <input type="checkbox"/> Friend | \$15.00 | \$40.00 | N/A |
| <input type="checkbox"/> Retired/Unemployed | \$15.00 | \$42.00 | N/A |
| <input type="checkbox"/> Student | \$15.00 | \$27.00 | N/A |
| <input type="checkbox"/> Library Assistant/Support Staff | \$15.00 | \$35.00 | \$13.00 |
| <input type="checkbox"/> Trustee | \$15.00 | \$40.00 | \$13.00 |
| SCLA Membership Divisions | | | |
| Select ONE SCLA division to be included in your basic SCLA membership (FREE): | Select additional divisions for \$1 each: | | |
| <input type="checkbox"/> DASL-Academic and Special Libraries <input type="checkbox"/> CATS-Computer and Technical Services <input type="checkbox"/> RASD-Reference and Adult Services <input type="checkbox"/> SSD-Support Staff <input type="checkbox"/> YASD-Young Adult Services | <input type="checkbox"/> DASL-Academic and Special Libraries <input type="checkbox"/> CATS-Computer and Technical Services <input type="checkbox"/> RASD-Reference and Adult Services <input type="checkbox"/> SSD-Support Staff <input type="checkbox"/> YASD-Young Adult Services | | |

| For NYLA and SCLA Joint Memberships ONLY: | |
|--|---|
| Select ONE NYLA section to be included in basic NYLA membership (FREE): | Select additional sections at \$10 each: |
| <input type="checkbox"/> ASLS-Academic and Special Libraries <input type="checkbox"/> FLS-Friends of Libraries <input type="checkbox"/> LAMS-Library Administration & Management <input type="checkbox"/> PLS-Public Libraries <input type="checkbox"/> RASS-Reference and Adult Services <input type="checkbox"/> SSL-School Librarians <input type="checkbox"/> SMART-Management of Info Resources & Technology <input type="checkbox"/> YSS-Youth Services | <input type="checkbox"/> ASLS-Academic and Special Libraries <input type="checkbox"/> FLS-Friends of Libraries <input type="checkbox"/> LAMS-Library Administration & Management <input type="checkbox"/> PLS-Public Libraries <input type="checkbox"/> RASS-Reference and Adult Services <input type="checkbox"/> SSL-School Librarians <input type="checkbox"/> SMART-Management of Info Resources & Technology <input type="checkbox"/> YSS-Youth Services |
| Sign me up for NYLA roundtables: (check as many as you like at \$10 each) | |
| <input type="checkbox"/> CNYSL-Central New York School Librarians <input type="checkbox"/> CORT-Correctional & Outreach Resource Team <input type="checkbox"/> ENYSLMA-Eastern NY School Lib. Media Assoc. <input type="checkbox"/> ESRT-Ethnic Services <input type="checkbox"/> FILM-Finding Inspiration in Literature & Movies <input type="checkbox"/> GIRT-Government Information <input type="checkbox"/> IFRT-Intellectual Freedom <input type="checkbox"/> ILRT-Information Literacy <input type="checkbox"/> LAR-Library Access | <input type="checkbox"/> LHRT-Local History <input type="checkbox"/> M&PRRT-Marketing & Public Relations <input type="checkbox"/> MSRT-Making and STEAM Roundtable <input type="checkbox"/> NYBLC-New York Black Librarians Caucus <input type="checkbox"/> PCRT-Pop Culture <input type="checkbox"/> PLRT-ParaLibrarians <input type="checkbox"/> RLRT-Rural Libraries <input type="checkbox"/> SLST-School Lib. of the Southern Tier-East <input type="checkbox"/> SRRT-Social Responsibilities |
| Yes! I would like to purchase member items (Optional) | |
| <input type="checkbox"/> Membership Certificate \$7 | <input type="checkbox"/> NYLA Pin \$6 |
| Yes! I would like to contribute to NYLA funds (Optional) | |
| <input type="checkbox"/> \$ _____ Advocacy Fund <input type="checkbox"/> \$ _____ Disaster Relief Fund <input type="checkbox"/> \$ _____ Empire State Center for the Book Fund <input type="checkbox"/> \$ _____ Intellectual Freedom Fund <input type="checkbox"/> \$ _____ Legal Defense Fund | <input type="checkbox"/> \$ _____ NYLA's Fund for the Future <input type="checkbox"/> \$ _____ NYLA Scholarship Fund <input type="checkbox"/> \$ _____ SSL Carol A. Kearney Scholarship Fund <input type="checkbox"/> \$ _____ SSL Laura Wedge Scholarship Fund <input type="checkbox"/> \$ _____ YSS Ann Gibson Scholarship Fund |
| Yes! I would like to contribute to SCLA funds (Optional) | |
| <input type="checkbox"/> SCLA Scholarship Fund | |

* In order to take advantage of these rates, you must be a NYLA associate member. Associate memberships are assigned as part of NYLA Organizational Memberships. Please note that SCLA membership added to an associate membership will have the same expiration date as the 'parent' organization, regardless of when the SCLA dues are paid.

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| <p>Mail Payment To:</p> <p>The New York Library Association</p> <p>6021 State Farm Road</p> <p>Guilderland, NY 12084</p> |
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| CALCULATE YOUR TOTAL | |
|-------------------------|----------|
| Dues Total: | \$ _____ |
| Division Dues: | \$ _____ |
| Section Dues: | \$ _____ |
| Roundtable Dues: | \$ _____ |
| Fund Donations: | \$ _____ |
| TOTAL ENCLOSED: | |
| | \$ _____ |