



American Indian Library Association
Membership Application
Membership are annual from July 1-June 30

Name: _____

Position Title: _____

Organization: _____

Address: _____

City _____ State: _____ Zip: _____

- I am a new member
- I am renewing my membership

Please add me to the electronic listserv

- Yes
- No
- Already Subscribed

Membership Type (Choose One)

- Individual (\$30.00)
- Retiree (\$20.00)
- Lifetime Membership (Individuals Only) (\$400)
- Vendor-Individual (\$30.00)
- Student (\$15.00)
- Tribal Library (\$40.00)
- Institutional (\$60.00)
- Vendor-Institutional (\$60.00)

Donate to the American Indian Library Association

- American Indian Youth Literature Award Amount \$ _____
- AILA Travel Grants Amount \$ _____
- AILA Scholarship Amount \$ _____
- AILA General Operations Amount \$ _____

Make checks payable to: American Indian Library Association

Send checks to:
Jody Gray, AILA Executive Director
309 19th Avenue South
499 Wilson Library
Minneapolis, MN 55455