



A chapter of the
American
Association
of Law Libraries

Dallas Association of Law Librarians
PO Box 130875
Dallas, TX 75313

Group Membership Form June 1, 2011 – May 31, 2012

Multiple part form.

- Part 1:** Identifies common information about your institution.
Part 2: Determines the total amount of dues owed.
Part 3: Requests data about each member in your group.

Please complete all parts and mail with a check to: DALL Treasurer, PO Box 130875, Dallas, TX 75313.

PART 1: Your Institution

Institution Name: _____
 Address 1: _____
 Address 2: _____
 City: _____
 State: _____
 Zip: _____
 Interlibrary Loan Phone: _____
 Interlibrary Loan Email: _____
 Interlibrary Loan Contact: _____

PART 2: Your Memberships

Please indicate the type and number of memberships you wish to add or renew.

Type	Description	Cost per Member	Number of Members	Total Cost
A.	Regular/Institutional (paid by employer)	\$40		\$
B.	Regular/Personal (paid by member)	\$40		\$
C.	Members in Transit	\$0		\$0
D.	Student (enrolled in library or law school)	\$5		\$
E.	Newsletter only (non-member)	\$10		\$

F.	Technology SIS (no charge)	\$ 0		\$
G.	Late Fees (after August 31)	\$10		\$
Total Amount Due				\$

Note: Memberships paid after August 31 are subject to a \$10 late fee per DALL's Bylaws.

Part 3: Individual Member Data

Member Name: _____
 Title: _____
 Phone: _____
 Fax: _____
 Email: _____

Subscribe to DALL listserv? _____ Yes _____ No
 AALL Member? _____ Yes _____ No
 Please circle: **New** or **Renewal** Membership?

Type of membership?

- _____ A. Regular/Institutional (paid by employer)
- _____ B. Regular/Personal (paid by member)
- _____ C. Members in Transit (recently displaced by employer)
- _____ D. Student (enrolled in library or law school)
- _____ E. Newsletter only (non-member)
- _____ F. Technology SIS (no charge)

Member Name: _____
 Title: _____
 Phone: _____
 Fax: _____
 Email: _____

Subscribe to DALL listserv? _____ Yes _____ No
 AALL Member? _____ Yes _____ No
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Part 3: Individual Member Data

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Title: _____
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Email: _____

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