



Your organization...where you can continue your library education, connect with your counterparts and contribute to the voice for libraries in New Hampshire.

Please make checks payable to NHLA and return with typewritten or printed form to:
NHLA Membership, c/o LGC, PO Box 617, Concord NH 03302-0617
Van stop: Concord, Local Government Center

NHLA MEMBERSHIP APPLICATION 2009

Membership is for the calendar year, January 1 through December 31, 2009

Name: _____ Renewal _____ New _____

Library: _____ Van stop: _____

Position Title: _____

Address: (is this library? ____ or, home? ____)

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

How long have you worked in/with libraries? Less than 2 years ____ 2-8 ____ 9-15 ____ More than 16 ____

Table with 3 columns: Membership Level, NHLA Sections, and Gifts. Rows include categories like Friends, Trustees, Students, Retired/unemployed librarians, and various salary brackets.

Membership Sub-total \$ _____ Sections sub-total \$ _____ Gifts sub-total \$ _____

\$ _____ Total Amount Due

Thank you for your membership and support!