

# CLAO MEMBERSHIP FORM - 2010



*If you have renewed for 2010, wonderful! Thank you for continuing to support the work of CLAO. Please pass on this membership form to someone you know.*

*Alison McCullough, President*

1. Fill out the entire form
2. Write out a \$15 cheque to Church Library Association of Ontario
3. Send the entire form and payment to:  
CLAO Membership Secretary, 603-155 Navy St. Oakville, ON L6J 2Z7

Church Membership  OR Personal Membership

A. MEMBER NAME or CHURCH REP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APT. \_\_\_\_\_

CITY/PROV: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

B. CHURCH NAME: \_\_\_\_\_ DENOMINATION: \_\_\_\_\_

CHURCH ADDRESS: \_\_\_\_\_

CITY/PROV: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

C. CHURCH LIBRARIAN'S NAME: (If different from above) \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PLEASE CIRCLE YOUR PREFERRED METHOD TO RECEIVE CLAO MAILINGS:

1. Personal Address    2. Church Address    3. Personal Email    4. Church Email

D. PLEASE COMPLETE THE FOLLOWING SO WE CAN SERVE YOU BETTER.

Congregation Size: \_\_\_\_\_ members

Number of Library Helpers: \_\_\_\_\_ (including yourself)

Library Size: \_\_\_\_\_ books (approximately)

\_\_\_\_\_ other holdings (DVDs, CDs, etc.)

I am working towards a Foundations Certificate (library training program).      Yes    No

I am a participant in the CLAO listserv (on-line church librarian bulletin board).      Yes    No

I am interested in the following topics at conferences or in *Library Lines*.

\_\_\_\_\_

\_\_\_\_\_

I would be interested in volunteering for: (conference workshops, Executive, committees, other)

\_\_\_\_\_

I would like to make the following suggestions as to ways in which CLAO may better serve me.

\_\_\_\_\_