



# 2020 MEMBERSHIP APPLICATION

<b>Name:</b>		
<b>Library (or Address):</b>		
<b>Email Address:</b>		
<b>Basic Membership</b> (Select one, based on annual salary)		
<input type="checkbox"/> Students, Retirees, Trustees, Friends <b>(\$15)</b> <input type="checkbox"/> Up to \$20,000 <b>(\$20)</b> <input type="checkbox"/> \$20,001 to \$30,000 <b>(\$30)</b> <input type="checkbox"/> \$30,001 to \$40,000 <b>(\$40)</b> <input type="checkbox"/> \$40,001 to \$50,000 <b>(\$50)</b> <input type="checkbox"/> \$50,001 and over <b>(\$55)</b> <input type="checkbox"/> Institutions & Vendors <b>(\$65)*</b>		\$ _____
<p>*Institutional members receive one copy of every membership publication plus 5 vouchers to permit a library employee or trustee to attend a workshop at member rates. (This does not include the Long Island Library Conference or the NCLA Annual Dinner)</p>		
<b>Divisions</b> (First division free, additional divisions can be added for \$3 each)		
<input type="checkbox"/> Academic & Special Libraries <input type="checkbox"/> Children's Services <input type="checkbox"/> Media Services <input type="checkbox"/> PR Services/Programming <input type="checkbox"/> Reference & Adult Services <input type="checkbox"/> Support Staff <input type="checkbox"/> Young Adult Services		\$ _____
<b>Donations</b> (Optional)		
<input type="checkbox"/> \$ _____ NCLA Scholarship Fund	<input type="checkbox"/> \$ _____ NCLA Education Grant Fund	\$ _____
<b>TOTAL ENCLOSED</b>		\$ _____

Please make checks payable to: **Nassau County Library Association**

Send this form and payment to: Janice Cosenza  
 NCLA Membership Committee Co-Chair  
 Syosset Public Library  
 225 S. Oyster Bay Rd  
 Syosset, NY 11791

Check this box if you are interested in the Dental Plan:

Questions? [NCLAMembership@gmail.com](mailto:NCLAMembership@gmail.com)