

ARKANSAS LIBRARY ASSOCIATION

2024 MEMBERSHIP FORM

Last Name: _____ First Name: _____ MI: _____

Position: _____ Place of Employment: _____

Work Address: _____ City: _____ State: _____ Zip: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Preferred Mailing Address Home Work E-Mail: _____

Telephone: _____

Work # Home #

New, First Time Member (*) Renewal Former Member

Arkansas Libraries journal (please check one): Electronically _____ Printed Format _____
(will be sent to email address provided)

**Do not include information in the above you do not want published in the online directory.
Register online at www.arlib.org**

Library Affiliation

_____ Academic _____ Public _____ School
_____ Special _____ Trustee/Friend _____ Retired

NOTE: Annual Dues are based on membership renewal month. Reminder notices will be sent via email.

Schedule of Dues

Salary	Dues
\$0 - \$14,999	\$25
\$15,000 - \$29,999	\$45
\$30,000 - \$44,999	\$65
\$45,000 - \$59,999	\$85
\$60,000 - \$74,999	\$105
\$75,000 - \$89,999	\$125
\$90,000 - Up	\$145
*New, First Time Member	\$25
Trustee/Friend	\$25
Retired Librarian	\$25
School Librarian	\$25
Student Member	\$25
Life Member	\$500

Please check the Communities of Interest you wish to join. No additional cost to join more than one.

Communities of Interest

- Arkansas Library Paraprofessionals (ALPS)
- Arkansas Queer Alliance for Libraries (AQuALib)
- College & University Librarians of Arkansas (CULAR)
- Community of School Librarians & Library Educators (COSSLE)
- Library Advocacy Community of Interest (LACI)
- Making Arkansas Libraries Accessible (MARLA)
- Membership Involvement
- Mental & Emotional Lives of Library Workers (MELLW)
- Public Libraries & Trustees
- Reference & Instruction Services (RISci)
- Social Media & Marketing
- Two Year Colleges (TYCci)
- WMS
- Youth Services

Institutional Member Dues (by budget)

Annual Operating Budget	Dues
Less than \$50,000	\$50
\$50,000-\$99,000	\$75
\$100,000-\$249,999	\$100
\$250,000-\$499,000	\$250
\$500,000-\$999,000	\$500
\$1,000,000-\$1,999,999	\$750
Over \$2,000,000	\$1,000

Payment Information

Basic Dues \$ _____
 ArLA Scholarship Contribution \$ _____
Total Payment \$ _____
 Check Enclosed Charge (Visa or Master Card)

Card Number: _____ Exp. Date: _____
 CVV _____
 Cardholder's Name: _____ Billing Zip: _____

Mailing Address:
 Arkansas Library Association
 P.O. Box 3821
 Little Rock, AR 72203
 E-Mail: info@arlib.org