


FIRST NAME\* \_\_\_\_\_ LAST NAME\* \_\_\_\_\_  
 INSTITUTION/ORGANIZATION/COMPANY\* \_\_\_\_\_  
 LIBRARY/AGENCY/DEPARTMENT\* \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_  
 CITY\* \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_ ZIP/POSTAL CODE \_\_\_\_\_  
 DAYTIME TELEPHONE \_\_\_\_\_ FAX NUMBER \_\_\_\_\_  
 EMAIL ADDRESS (REQUIRED FOR IMMEDIATE CONFIRMATION) \_\_\_\_\_

MLA MEMBER ID \_\_\_\_\_ **Indicate voting rights:**  
 Individual  Institutional

Check here if you are a new member or if you are attending an MLA annual meeting for the first time.

COUNTRY\* (IF OUTSIDE THE US) \_\_\_\_\_

 If you require special accommodations, please attach a written description of your needs.

\* APPEARS ON BADGE

**I. REGISTRATION FEES**

(Circle one category within package.)

**BEFORE APRIL 15**      **AFTER APRIL 15**

**Package A: Inclusive**

- MLA member/institutional representative, AALL, AMIA, CHLA/ABSC, ICIRN, NRHA, and SLA members ..... \$405 ..... \$465
- MLA emeritus member ..... \$205 ..... \$265
- Nonmember ..... \$610 ..... \$670

**Package B: Conference-only**

- MLA member/institutional representative, AALL, AMIA, CHLA/ABSC, ICIRN, NRHA, and SLA members ..... \$295 ..... \$355
- MLA emeritus member ..... \$150 ..... \$210
- MLA student member ..... \$ 25 ..... \$ 25
- Nonmember ..... \$445 ..... \$505

**Package C: One-day attendance**

Indicate day:  Mon  Tue  Wed  Thu

- MLA member/institutional representative, AALL, AMIA, CHLA/ABSC, ICIRN, NRHA, and SLA members ..... \$155 ..... \$155
- MLA emeritus member ..... \$ 80 ..... \$ 80
- MLA student member ..... \$ 25 ..... \$ 25
- Nonmember ..... \$235 ..... \$235

**SECTION I. SUBTOTAL**      \$ \_\_\_\_\_

**II. OPTIONAL FEES**

(Indicate quantity for each item. Find event descriptions beginning on page 11.)

- Welcome Reception & Opening of Hall of Exhibits  
# Tickets \_\_\_\_\_ @ \$35 = \$ \_\_\_\_\_
- Awards Celebration and Luncheon  
# Tickets \_\_\_\_\_ @ \$60 = \$ \_\_\_\_\_
- MLA Reception: Futuro Magnifico  
# Tickets \_\_\_\_\_ @ \$80 = \$ \_\_\_\_\_  
Children under 18 # Tickets \_\_\_\_\_ @ \$45 = \$ \_\_\_\_\_
- Lunch with MLA Section Members  
# Tickets \_\_\_\_\_ @ \$25 = \$ \_\_\_\_\_
- Friends of the.nlm Event  
FNLM Member # Tickets \_\_\_\_\_ @ \$15 = \$ \_\_\_\_\_  
Nonmember # Tickets \_\_\_\_\_ @ \$38 = \$ \_\_\_\_\_
- Chapter Council Presents Sharing Roundtables  
**Must include topic #** \_\_\_\_\_  
**1 Ticket @ \$25 = \$ \_\_\_\_\_**
- Meeting CD-ROM # \_\_\_\_\_ @ \$39 = \$ \_\_\_\_\_

**SECTION II. SUBTOTAL**      \$ \_\_\_\_\_

Check box if attending Hospital Libraries Section Business Meeting & Reception

**III. CONTINUING EDUCATION COURSES (Enter course number and cost found on pages 19-26.)**

Date	First choice Full-, 6-hr., or half-day a.m.		First choice Half-day p.m.		First choice only Subtotal	Second choice Full-, 6-hr., or half-day a.m.		Second choice Half-day p.m.
	Course #	\$ Amount	Course #	\$ Amount		Course #	Course #	
MAY 14/DAY 1								
MAY 15/DAY 2								
MAY 19/DAY 3								

**SECTION III. SUBTOTAL (FIRST CHOICE ONLY)**      \$ \_\_\_\_\_

**IV. 2005 MLA MEMBERSHIP DUES**

(Indicate membership status.)

- NM701 New member (attach the application on page 36)
- RM702 Membership renewal (attach your latest invoice or application form on page 36)

**SECTION IV. SUBTOTAL**      \$ \_\_\_\_\_

SECTION I      \$ \_\_\_\_\_  
 SECTION II      \$ \_\_\_\_\_  
 SECTION III      \$ \_\_\_\_\_  
 SECTION IV      \$ \_\_\_\_\_  
**TOTAL PAYMENT**      \$ \_\_\_\_\_

**PAYMENT INFORMATION (in US funds)**

- Check payable to Medical Library Association
- MasterCard  Visa  AmEx  Discover
- Bill me. (MLA members only) P.O. # \_\_\_\_\_

PRINT NAME \_\_\_\_\_

CARD NUMBER \_\_\_\_\_

EXP. DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_