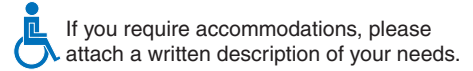


FIRST NAME*										LAST NAME*									
INSTITUTION/ORGANIZATION/COMPANY*																			
LIBRARY/AGENCY/DEPARTMENT*																			
MAILING ADDRESS																			
CITY*					STATE/PROVINCE					ZIP/POSTAL CODE									
DAYTIME TELEPHONE										FAX NUMBER									
EMAIL ADDRESS (REQUIRED FOR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

MLA MEMBER ID Individual Institutional

* APPEARS ON BADGE



COUNTRY* (IF OUTSIDE THE US)

I. REGISTRATION FEES (Circle one category within package.)

	By Apr. 16	After Apr. 16
Package A: Super Inclusive		
• MLA member/institutional representative, ALISE, AALL, CHLA/ABSC, ICIRN member	\$430	\$490
• MLA emeritus member	\$230	\$290
• Nonmember	\$635	\$695
Package B: Inclusive		
• MLA member/institutional representative, ALISE, AALL, CHLA/ABSC, ICIRN member	\$405	\$465
• MLA emeritus member	\$205	\$265
• Nonmember	\$610	\$670
Package C: Conference only		
• MLA member/institutional representative, ALISE, AALL, CHLA/ABSC, ICIRN member	\$295	\$355
• MLA emeritus member	\$150	\$210
• MLA student member	\$ 25	\$ 25
• Nonmember	\$445	\$505
Package D: One-day attendance		
Indicate day: <input type="checkbox"/> Sun <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed		
• MLA member/institutional representative, ALSIE, AALL, CHLA/ABSC, ICIRN, PLA member	\$155	\$155
• MLA emeritus member	\$ 80	\$ 80
• MLA student member	\$ 25	\$ 25
• Nonmember	\$235	\$235

II. ADDITIONAL TICKETS (One ticket to each of these 3 events is included with Packages A or B. Event descriptions begin on p. 12.)

- Welcome Reception and Opening of Hall of Exhibits
Tickets _____ @ \$35 = \$ _____
- Awards Ceremony and Luncheon
Tickets _____ @ \$60 = \$ _____
- Tuesday MLA Reception
Tickets _____ @ \$80 = \$ _____
Children under 18 # Tickets _____ @ \$45 = \$ _____

OPTIONAL TICKETS

- Chapter Council Presents Sharing Roundtables
Must include topic # _____
1 Ticket @ \$30 = \$ _____
- Friends of the NLM Reception
Tickets _____ @ \$50 = \$ _____
- Meeting CD-ROM # _____ @ \$39 = \$ _____
(The CD-ROM is included in Package A registration.)

- Check box if attending New Members/First-Time Attendees Breakfast
 Check box if attending Hospital Libraries Section Business Meeting and Reception

SECTION I. SUBTOTAL \$ _____

SECTION II. SUBTOTAL \$ _____

III. CONTINUING EDUCATION COURSES (Enter course number and cost found on pages 14–21.)

Date	First choice		First choice		First choice only Subtotal	Second choice	
	Full-, 6-hr., or half-day a.m.	Half-day p.m.	Half-day p.m.	Half-day p.m.		Full-, 6-hr., or half-day a.m.	Half-day p.m.
	Course #	\$ Amount	Course #	\$ Amount		Course #	Course #
MAY 18/DAY 1							
MAY 19/DAY 2							
MAY 23/DAY 3							

SECTION III. SUBTOTAL (FIRST CHOICE ONLY) \$ _____

IV. 2007 MLA MEMBERSHIP DUES

- (Indicate membership status.)
 NM701 New member (attach application on page 29)
 RM702 Membership renewal (attach your latest invoice or application form on page 29)

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 _____