



CLAO MEMBERSHIP FORM

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

1. Fill out the entire form.
2. Write out a \$20 cheque to Church Library Association of Ontario
3. Mail the entire form and payment to:
CLAO Treasurer, 112 Bristol Street, Guelph, ON N1H 3L6

A. MEMBER NAME: _____

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 (ONE) PREFERRED METHOD TO RECEIVE CLAO MAILINGS:

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