

# SOUTH DAKOTA LIBRARY ASSOCIATION INDIVIDUAL MEMBERSHIP APPLICATION

Annual membership dues must be received before September 1st to qualify for member rates at the annual conference. Membership runs for one year from date of joining or renewal.

**INDIVIDUAL MEMBERSHIP:** Librarians, support staff, retired members, trustee, friends of libraries, and other individuals. Students are only eligible for student rates for three years.

**FRIEND MEMBERSHIP:** Support the organization by contributions of \$50.00 or more designated for the SDLA Leon Raney Endowment Fund. A friend member shall not be entitled to the privileges of an individual member.

New membership \_\_\_\_\_ or renewal \_\_\_\_\_?

Would you be willing to run or be nominated for an SDLA office? Yes \_\_\_\_\_ No \_\_\_\_\_

**Check your *Book Marks* subscription preference:** Print via courier (include courier code) \_\_\_\_\_  
Print via USPS \_\_\_\_\_ Electronic via email notification \_\_\_\_\_ Electronic via RSS feed \_\_\_\_\_

**COMMITTEE INTERESTS:** Please check committees on which you would like to serve:

- |   |  |
|---|--|
| <input type="checkbox"/> Library Issues       | <input type="checkbox"/> Nominating                      |
| <input type="checkbox"/> Intellectual Freedom | <input type="checkbox"/> Professional Development Grants |
| <input type="checkbox"/> Public Relations     | <input type="checkbox"/> Auditing                        |

**MEMBERSHIP DUES SCHEDULE:** Sliding scale based on income for library-related position.

<u>Current Salary</u>	<u>Dues</u>	<u>Current Salary</u>	<u>Dues</u>
Trustees, Retirees, Students---	\$15.00	\$35,000 to \$44,999----	\$55.00
Under \$15,000 -----	\$25.00	\$45,000 to \$54,999----	\$70.00
\$15,000 to \$24,999-----	\$35.00	\$55,000 to \$54,999----	\$80.00
\$25,000 to \$34,999-----	\$45.00	\$65,000 and over-----	\$100.00

**ENTER PERSONAL MEMBERSHIP DUES HERE** ..... \$ \_\_\_\_\_

**SECTIONS:** Select **two** FREE sections with **individual** membership. *Additional sections are \$5.*

- |   |   |
|---|---|
| <input type="checkbox"/> Academic//Health/Special | <input type="checkbox"/> Public and Trustee |
| <input type="checkbox"/> School Library Media     | <input type="checkbox"/> Support Staff      |

**ENTER ADDITIONAL SECTION MEMBERSHIP DUES HERE** ..... \$ \_\_\_\_\_

**ADDITIONAL AMOUNT DESIGNATED TO THE SDLA LEON RANEY ENDOWMENT FUND ...** \$ \_\_\_\_\_

**TOTAL:** ..... \$ \_\_\_\_\_

Make checks payable to the **SDLA**. Canceled check is your receipt. For credit card payment, use online form. Mail form & check to: **SDLA, PO BOX 283, LENNOX, SD 57039.**

Full Name \_\_\_\_\_

Position/Title \_\_\_\_\_

Institution \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Check here if you do not want your name sold with membership lists. \_\_\_\_\_