



**Capital District Library Council**  
**Personal Membership Application**  
**September 1, 2009 – August 31, 2010**

Please print or type form

**Name:** \_\_\_\_\_

**Work Title:** \_\_\_\_\_

**Library:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Extension:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Send mailings to: work** \_\_\_\_\_ **home** \_\_\_\_\_

**Add me to CDLC-L, the CDLC regional email list: Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Add me to the following CDLC interest groups:**

- \_\_\_\_\_ Capital Area Library Assistants (CALA)
- \_\_\_\_\_ Capital District Business Librarians (CDBL)
- \_\_\_\_\_ Capital District Library Retirees Group
- \_\_\_\_\_ Cataloging and Technical Services Group (CATS)
- \_\_\_\_\_ Government Information Interest Group (GIIG)
- \_\_\_\_\_ Information Literacy Group
- \_\_\_\_\_ SLEEK (Librarians' Social Group)

**Membership Level [check one]** All CDLC personal members receive discounted pricing on CDLC events.

<b>Level</b>	<b>Amount</b>
_____ <b>Benefactor</b>	\$250
_____ <b>Patron</b>	\$100
_____ <b>Contributing</b>	\$45
_____ <b>Basic</b>	\$15
_____ <b>Student/Retiree</b>	\$10

**Please make checks payable to Capital District Library Council and send to:**  
**CDLC, 28 Essex Street, Albany, NY 12206**