

UMASL

Union Middlesex Association of School Librarians

Apply Online for FASTER PROCESSING:
<https://tinyurl.com/UMASL2022Membership>

Last Name _____

First Name _____

Home Address

Library/Institution Information

Street _____

Name of Library/Institution/School

City _____ State _____

Grade levels taught _____

Zip _____ County _____

Street _____

Home Phone (____) _____

City _____ State _____

Home Email Address: _____

Zip _____ County _____

Please send UMASL communications to:

Work Phone (____) _____

_____ home _____ work

Work Email Address:

Type of Membership

_____ Active Professional \$15.00

District _____

_____ Associate Member \$10.00
(includes Retired/Student)

Principal _____

(Associates support UMASL's mission but do not live or work in the counties we serve). Student refers to matriculation in programs resulting in MLIS or Associate School Library Media Specialist

Make checks payable to UMASL

Which committee(s) would like to serve on?

_____ Membership
_____ Programming
_____ Publicity and Archiving

Please return this form and dues to:

John P. Faber School
C/O Beth Willoughby, UMASL Treasurer
400 High St, Dunellen, NJ 08812