



Print clearly, please!

Mail to:
Membership
PO Box 122
West Linn OR 97068

same as last year-changed new member -
 membership #(on mailing label)_____

Last name: _____
 First name: _____
 Position/Title: _____
 School: _____
 District or company: _____

e-mail for Directory & newsletter:

Listserv e-mail:

Employment Level/s:
Dist/ESD Secondary Middle Elem Higher Ed

Library/School/Personal web page URL:

Send mail to: home work

Work (include work info in the directory: yes no)

Address: _____
 City _____
 State:_____ Zip(9-digit) _____
 Work Phone: _____

Home (include home info in the directory: yes no)

Address: _____
 City: _____
 State:_____ Zip(9-digit) _____
 Home Phone: _____

County(for OEMA region) _____

- Professional (Certificated) library and technology specialists\$40_____
- Associate (non-Certificated, full-time students, retired, out of state)\$25_____
- Commercial\$50_____
- Joint membership with OLA.....\$15_____

Total enclosed..... _____

Note:
 Send changes in information to:
 oemamembership@comcast.net

Important note: Membership expires at the Fall Conference in October.