MEMBERSHIP FORM

Date (Month, Year): _______________________
NAME:_____________________________________
TITLE:_____________________________________
COLLEGE:_________________________________
EMAIL ADDRESS: ___________________________

Membership dues for current academic year (July-June) should be paid no later than December 31.

Please check the appropriate category:

___ Full Member $20.00 ___ Associate Member $10.00

Full Membership: Membership is also open to anyone on the staffs of the City University libraries who has a Master's degree in educational technology or a master's degree in computer science, and to anyone on the staffs of the City University who has a master's degree in library science from an accredited institution. (LACUNY Constitution, Article III, Section 1)

Associate Membership: All non-faculty library employees and others employed in library service in the City University of New York including retirees, high school teachers affiliated with the City University of New York, library/information science students attending Queens College Graduate School of Library and Information Studies, and library/information science students employed at a City University library. (LACUNY Constitution, Article III, Section 2.)

You may join online at https://lacuny.org/Membership

Make your check payable to LACUNY. Print and fill out this form. Give it to your campus DELEGATE or send it directly to:

LACUNY
Office of Library Services
205 East 42nd Street, Floor 9
New York, NY 10027