

# MEMBERSHIP RENEWAL FORM 2010



NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TELEPHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

CURRENT OCCUPATION: \_\_\_\_\_

\_\_\_\_\_

WORK ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TEL. (WORK): \_\_\_\_\_

FAX (WORK): \_\_\_\_\_

E-MAIL (WORK): \_\_\_\_\_

Kindly complete this form and return together with a cheque of €12 to the address below if you have not yet paid your 2010 renewal fees.

**MALTA LIBRARY AND INFORMATION ASSOCIATION**  
**c/o UNIVERSITY LIBRARY**  
**MSIDA MSD 2080**