



2011 Individual Membership Form

Register online at www.NCABAALAS.org with secure online payment (or mail/fax form to address below)

- Membership includes on-line subscription to NCAB Newsletter, discounts for workshops, NCAB annual seminar, NCAB List-serv, monthly meeting socials, etc.
- MEMBERSHIP DUES are \$20.00 per calendar year (make check payable to NCAB/AALAS)
- WAIVER of fee if you have received your certification (ALAT, LAT, LATG, CMAR) recently. To receive a complimentary one (1) year membership, send a copy of your certification along with this completed form. NCAB/AALAS will **only** accept the certification that has been sent to you from the **National AALAS office**.

Name: _____ Dr. ___ Mr. ___ Mrs. ___ Ms. ___

Job Title: _____ Company: _____

Email address (required) _____

Mailing Address (home ___; work ___) _____

Phone (home ___; work ___): _____ Fax: _____

Current AALAS member? Yes ___ No ___ Referred by (new members only) _____

Certification (circle): ALAT LAT LATG CMAR Certification date: _____ *

** Membership fee waived if certification within six months of application; certification must accompany this form*

Membership Dues – 2011 \$20.00

01.01.11 through 12.31.11

Sign up online at www.NCABAALAS.org at secure site

Or mail/fax completed forms to:

NCAB/AALAS
Individual Membership
PO Box 224
Frederick, MD 21705
Fax: 301-695-7561

PLEASE PRINT CLEARLY