



THEATRE LIBRARY ASSOCIATION

TLA MEMBERSHIP FORM - INSTITUTIONAL

Institution Name _____
Address (line 1) _____
Address (line 2) _____
City _____ State/Province _____
Zip/Postal Code _____ Country _____
Website _____

Name of Contact Person _____
Telephone Number _____
Fax Number _____
Email Address 1* _____
Email Address 2* _____

**Broadside, Newsletter of the Theatre Library Association and the Membership Directory are published online and are no longer mailed to TLA members. If you include an email address, we will notify you by email when a new issue of Broadside or a new edition of the Membership Directory is posted to the TLA Website.*

Membership Period: January 1 – December 31, 2010

Membership Category:

INSTITUTIONAL \$40

ATTENTION NON-U.S. MEMBERS: If you have a mailing address outside the United States, please check the box below and include the following surcharge with your payment:

NON-U.S. SURCHARGE \$10

TOTAL _____

Enclose a check made payable, in U.S. funds only, to THEATRE LIBRARY ASSOCIATION, and send to the following address:

Theatre Library Association
c/o The New York Public Library for the Performing Arts
40 Lincoln Center Plaza
New York, NY 10023
USA