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Fax the form to ALA Member and Customer Service at 312-280-1538 or mail the form to ALA Member and Customer Service at 50 East Huron, Chicago, IL 60611 (credit card or check). For assistance, please contact the ALA Customer Service Center at 1-800-545-2433, press 5.

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Name _____
Prefix _____
First _____
Middle _____
Last _____
Email (**Required**) _____

Title _____
Place of Employment _____
Address _____
City _____
State _____
Zip _____
Country _____
Work Phone _____
Home Phone _____
FAX _____

Billing Address, if different _____
City _____
State _____
Zip _____

send invoice

VISA MasterCard American Express
cardholder's name _____
account # _____
expiration _____

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- | | |
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