

HAISLN - Houston Area Independent School Library Network

2016-2017 Membership Form

Librarian Name	Library Phone Number E-Mail address	Grade Level

School Name: _____

Library Automation System: _____

Registration Fees:

\$20.00 for the first librarian; additional personnel \$10.00 each

Total Amount Due: \$ _____

Make checks payable to: HAISLN

Please return this form, filled out, with your check. List all of the librarians that are being registered for HAISLN.

Mail to:

Krystal Irven
Episcopal High School
4650 Bissonnet
Bellaire, TX 77401