



2024 APPLICATION FOR MEMBERSHIP

Tax ID #: 88-0173845

Name: _____ Title: _____

ALA Member # _____ Member Since (Year) _____

All LV chapter members must be National ALA members. If you do not have an ALA member number, you must attach a copy of your ALA application with this chapter application.

Employer: _____

Business Address: _____ (street) (city) (state) (zip)

Phone: _____

E-Mail Address: _____

Prior Employer (If Legal): _____

Birthday (Day & Month): _____

Please Make Checks Payable To: Las Vegas -ALA or Pay Via Credit Card

Send application and check to: Shawna Yost, Chapter Treasurer
c/o Jeffrey Burr Ltd.
2600 Paseo Verde Pkwy, Suite 200
Henderson, NV 89074

To Pay by Credit Card:
Name on Card _____
Card # _____
Expiration _____
CVV Code _____
Billing Zip Code _____

ANNUAL ALA-LV DUES

Regular Member (\$200.00)\$

OPTIONAL:

Additional Members (\$100.00).....\$

ALA members within same Firm receive 50% discount from regular \$200.00 dues. Please submit a form for EACH additional Member.

TOTAL INCLUDED WITH THIS APPLICATION\$ 0.00