

FULL INSTITUTIONAL MEMBERSHIP PRIVILEGE FORM

Name of Institution: _____ Outreach? Yes No

Mailing Address: _____

Journal Shipping Address (if different from mailing): _____

Name of Institution Contact Person: _____

Email Address: _____ Phone: _____

Select a total of 4 privileges from the options listed below. Each checked box counts as a privilege selection.

(1) Select **AT MOST 2** subscriptions:

- Print Subscriptions to 2020 *JSL* and 2020 *BSL*
- Print Subscription to 2020 *RSL*
- Online Subscriptions to 2020 *JSL* and 2020 *BSL*
- Online Subscription to 2020 *RSL*

(2) Select **AT MOST 2** add-ons:

- 2020 “add-on” subscription to *JSL* and *BSL* in the format (print/online) not chosen above
- 2020 “add-on” subscription to *RSL* in the format (print/online) not chosen above

(3) One selection = nomination for **3 student members** or **1 regular member**

This privilege may be selected more than once (i.e. selecting it twice allows the nomination of 6 student members).

*Each nominee, even those who are already ASL members, **must** complete one of the enclosed nomination forms.

Student member names (if applicable):

- (1) _____ (2) _____ (3) _____
- (1) _____ (2) _____ (3) _____
- (1) _____ (2) _____ (3) _____
- (1) _____ (2) _____ (3) _____

Regular member names (if applicable):

- _____
- _____
- _____
- _____

(4) Select **1** back volume year. *This item may be selected more than once.*

Volumes from 1936 to 2019 of *JSL* and corresponding volumes from 1995 to 2019 of *BSL* are available:

- Year: _____
- Year: _____
- Year: _____
- Year: _____

Volumes from 2008 to 2019 of *RSL* are available:

- Year: _____
- Year: _____
- Year: _____
- Year: _____

