



## **2015 SELA Summer Conference**

### **Registration Form**

*\*Registration Deadline: August 3, 2015*

Name: \_\_\_\_\_

Institution: \_\_\_\_\_

Please help us update your vital information. . .

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Registration fee: \$60. This includes lunch and afternoon break (Friday) and continental breakfast (Saturday). Please make your check payable to the Southeastern Library Association. Mail this form and your payment to:**

**SELA Administrative Services  
P.O. Box 950  
Rex, Georgia 30273-0950**

**Phone: 678/466-4339    FAX: 678/466-4349**