

Consent to be an Individual Member of the Australian and New Zealand Theological Library Association Limited

To: The Association

I, _____ consent to be a member of the Association.

Full name: _____

Address: _____

Phone: _____ Email: _____

Library/Institution: _____
(if applicable)

I agree to be bound by the Constitution of the Australian and New Zealand Theological Library Association Limited.

Signature: _____ Date: _____

Send completed form to:

Kerrie Stevens (ANZTLA Secretary)
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AUSTRALIA

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Australian and New Zealand Theological Library Association Ltd. <http://www.anztla.org/>

ABN 66 101 980 287

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