



New York-New Jersey Chapter/MLA - 2010 Meeting Registration:

Badge and Contact Information:

Name _____

Daytime phone _____ E-mail _____

Title _____ Library/Institution _____

Please check here if this is your first Chapter Meeting

Meals: Regular Vegetarian Kosher

Program: *Our afternoon program will feature small group discussions on a series of topics. These will be similar to the Sharing Roundtables at MLA, except that at the end each group will share their collective wisdom. Each attendee will participate in 2 groups. However, we may need to cancel a group if there is not adequate interest. Please rank the top 3 (1,2,3) groups you would like to participate in below.*

Changing Roles: *How are librarians embracing new roles within their institution and reinventing their models of service?*

Changing Stewardship: *What can different generations of librarians teach each other?*

Changing Economic Issues: *How are librarians doing more with less, creating innovating purchasing arrangements, finding new funding resources? Or how far can a librarian stretch a dollar?*

Changing Technology – Social Media: *How are librarians implementing social media?*

Changing Technology -- Educational Media: *How are librarians implementing new educational media?*

Changing Technology – Electronic Medical Record: *Are librarians a part of their institutions' electronic medical record development and/or implementation?*

Changing Perceptions: *What are librarians doing within their institution to demonstrate their library's value and the institution's return on investment?*

Changing Spaces: *What does the library space look like now and what will it look like in the future?*

Fee: \$40 (Members) / \$55 (Non-Members) / \$25 (Student Members & Members currently between positions) \$

Renew my NY/NJ MLA Chapter membership for **2011 (\$15) \$**

My contact information is the same (otherwise please include the membership form with your updated information. [The form is available here.](#))

(Please make checks payable to NY/NJ Chapter of MLA)

Amount Enclosed: \$

Mail the completed form and your check to: Ms. Bharathi Subramanian, Assistant Librarian
Medical Research Library of Brooklyn
SUNY Downstate Medical Center
450 Clarkson Avenue, Box 14
Brooklyn, NY 11203