



international research society
for children's literature

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APPLICATION FORM

for affiliated membership

Please fill in completely and return to Mavis Reimer (Treasurer / Membership Secretary), preferably as an email attachment (contact details above right):

Name of society <i>Include translation into English if appropriate</i>	
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Contact person/function	
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Mailing address	
Postal code and country	

Contact details <i>Include country code and area code</i>		Phone	
		Facsimile	
		Email	
		Website	

Membership statistics <i>How many members does your society have at present and from which country/countries or region(s)?</i>		Number	
		Country/ies or region(s)	

Main activities	
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Any other information	
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Date

<input type="checkbox"/>	I/we certify that the information I/we have provided to the IR SCL on this membership application is true and correct (if agreed, please check box).
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