



international research society
for children's literature

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APPLICATION FORM

for institutional membership

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

Name of institution	<input type="text"/>
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Contact person/function	<input type="text"/>
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Mailing address	<input type="text"/>
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<input type="text"/>

Postal code and country

<input type="text"/>

Contact details

Include country code and area code

Phone

<input type="text"/>

Facsimile

<input type="text"/>

Email

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Website

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Any other information

<input type="text"/>

Date

<input type="text"/>

I/we certify that the information I/we have provided to the IRSC L on this membership application is true and correct (if agreed, please check box).