HSLIC AGREEMENT
Health Science Libraries and Information Consortium
January 1, 2018 – December 31, 2018

Based on the 2017 revisions to HSLIC bylaws

The purpose of HSLIC is to coordinate cooperative efforts among health science libraries in Maine. HSLIC’s primary goals are:

- to promote health science libraries and librarianship;
- to share knowledge and experiences in library operations and resources;
- to provide continuing development of the framework for resource sharing within Maine; and
- to provide opportunities for the continuing education of health science librarians and support personnel.

Every year there is a HSLIC meeting. The fall meeting is designated the Annual Meeting. Supervision of HSLIC affairs between these regular meetings is carried out by the Executive Board. This body, composed of a Chairperson, Vice-chair/Treasurer, and other Representatives, is elected in accordance with HSLIC by-laws. All personnel of member institutions are eligible to hold office.

Conditions of Membership

1. The membership of HSLIC shall be composed of institutions, associations, and individuals in the state of Maine with an interest in health science library resources. Institutions must have a designated library manager.

2. Each institution shall designate one official representative as their health science library spokesperson. Each institution shall have one vote at all general business meetings.

3. Members shall be willing and able to support HSLIC through:
   a. providing free and reciprocal interlibrary loan and document delivery to members;
   b. entering journal holdings in SERHOLD;
   c. using Docline actively;
   d. attending semiannual meetings; and
   e. subscribing to the HSLIC electronic discussion list.
   f. Institutional membership includes up to three (3) staff participation in the NAHSL Maine SIG.

4. Membership dues of $150.00 shall be paid to HSLIC on or before January 31, 2018. Memberships not renewed by March 1, 2018, will be charged a late fee of $50.00.
HSLIC MEMBERSHIP RENEWAL INVOICE

The dues for January 1, 2018, through December 31, 2018 are $150.00.

(Please update your information for the HSLIC Directory)

Library Contact Name: ________________________________

Institution Name: __________________________________

Library Name: _____________________________________

Address: __________________________________________

City, State, Zip Code: ________________________________

Phone Number: _____________________________________

Fax Number: ________________________________________

E-mail Address: _____________________________________

MLA status : __Yes __No

NAHSL committee preference: ________________________

AHIP level (if any): _________________________________

Library Type: __Academic __Academic Medical __Community College __Community Health __Company __Government __Hospital __Public __Other

Library Website URL: ________________________________

Additional Notes: (including up to two other contacts at your library who want to be included in the HSLIC-L listserv and NAHSL SIG)

Contact 2 Name:____________________________________

Email:______________________________________________

MLA status : __Yes __No

NAHSL committee preference: ________________________

AHIP level (if any): _________________________________
Contact 3 Name:_________________________________________

Email:__________________________________________________

MLA status : ___Yes ___No

NAHSL committee preference: ____________________________

AHIP level (if any): ____________________________

____________________________________________/____________________
Authorized Signature                                      Date

Please make check payable to HSLIC. Return one copy of this agreement and check to:

HSLIC
Treasurer
110 Marginal Way #245
Portland, ME 04101