

Great Lakes Independent Booksellers Membership Form

Store Name: _____ Contact Name: _____

Position: _____ Years in Bookselling: ____ Website: _____

Phone: _____ Fax: _____ Email: _____

Address: _____ City, St, ZIP: _____

Facebook URL: _____ Twitter YRL: _____

Blog URL: _____ Year Store opened: _____

Year current owner purchased store: _____ Square Footage: _____ % for books _____

Used Books %sales: _____ Total Number employees: ____ Fulltime: ____ Part-time: ____

Do You: Sell e-books? ___ Sell Kobos: ___ Host Book clubs: ___ Have café/coffee shop: ___

Are you a general Bookstore? ___ Specialty? ___ What specialty? _____

Do you report sales to: ___ NY Times ___ ABA Do you have a newsletter? ___ Print ___ online

___ % Publisher orders ___ % Distributor orders ___ In-store reps ___ Telephone sales reps

POS System: _____ Do you use Above the Treeline: ___ Edelweiss? ___

Payment Information: \$100 annual membership. Please complete this form and return with check or credit card information. Credit Card Number _____

Exp. Date: _____ Security Code: ___ Name on Card: _____

Great Lakes Independent Booksellers Association

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