CONSORTIUM OF UGANDA UNIVERSITY LIBRARIES
P.O.Box 26184, Kampala — Tel: 0703 815721 / 0772 985720
Email: info@cuul.or.ug — Website: https://cuul.or.ug

Membership Application Form

2027

Please tick Applicable

☐ **New Member**

☐ **Renewal**

Name of the Library or Institution:

The recent bye-laws of the Constitution of the Consortium of Uganda University Libraries require that "Each Member shall designate in writing to the consortium one representative (Consortium Liaison) and one alternate to represent the Member for all purposes of the Consortium. A member may change that designation from time to time by written notice to the Consortium.

Librarian:	Librarian:
Name:	Name:
Title:	Title:
Postal Code:	Postal Code:
Telephone:	Telephone:
E-mail:	Email:
Full postal address of Institution:	

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IP addresses:

As a member of the consortium of Uganda University Libraries, the

_____

Agrees to support the Constitution and its Bylaws and objectives of the Consortium (please access our constitution from our Website: www.cuul.or.ug).

Name:	Title:
Signature:	Date:

Please indicate the category of applicable fees below.

2027 Membership fees schedule			
Membership category	Membership fees (UGX)	E-resources subscription fees ($)	Check One
Full Member	750,000/=	5,075$	
Affiliate Member	450,000/=	5,075$	
Registration fees	100,000/=		

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Please return the completed application form, along with a cheque or cash payable to:

Bank Name: Standard Chartered Bank Uganda Ltd.

Account Name: Consortium of Uganda University Libraries.

Account Number: 01020-12444-900

OR

Dollar Account Number: 8702-012444-900

CUUL Treasurer:



Ms Julirine Nakanwagi, Kampala International University Library;

Tel.0787-480-380 or 0703-887-551

Email: cuultreasurer@gmail.com

This form is your invoice. Receipts are issued upon payment. Purchase orders are accepted.