

Friends of the Library Membership Form

If you would like to join the Friends, complete and mail this form with appropriate check made payable to:

Friends of the Library
205 Riverside Parkway NE
Rome, GA 30161

I WANT TO BE A FRIEND! ENCLOSED ARE MY ANNUAL DUES.

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

_____ STUDENT PATRON \$2.00

_____ INDIVIDUAL/FAMILY SPONSOR PATRON \$25.00

_____ INDIVIDUAL PATRON \$5.00

_____ DONOR PATRON \$50.00

_____ FAMILY PATRON \$10.00

_____ SUSTAINING PATRON \$100.00

_____ ORGANIZATION SPONSOR \$25.00

_____ OTHER GIFTS _____