

YOUR SUPPORT!

FRIENDS OF THE LIBRARY MEMBERSHIP APPLICATION

PORTER COUNTY
PUBLIC LIBRARY SYSTEM

YOUR SUPPORT!

FRIENDS OF THE LIBRARY MEMBERSHIP APPLICATION

Friends

Name:	Name:
Mailing address:	Mailing address:
Phone:	Phone:
Email:	Email:
Membership Level (select one)	Membership Level (select one)
Student \$5	Student \$5
Senior Citizen (65+) \$5	Senior Citizen (65+) \$5
Individual \$10	Individual \$10
Family \$20	Family \$20
Corporate \$100	Corporate \$100
Sustainer \$250	Sustainer \$250
Benefactor \$2500	Benefactor \$2500
Make checks payable to: Public Library Friends	Make checks payable to: Public Library
THANK YOU FOR	THANK YOU FOR