



FRIENDS OF THE LIBRARY

A registered charitable organization

MEMBERSHIP APPLICATION

NAME _____

ADDRESS _____

PHONE NUMBER _____

E-MAIL ADDRESS _____

- INDIVIDUAL FRIEND** \$10.00 per year
- FAMILY FRIEND** \$20.00 per year
- COMMUNITY FRIEND** \$25.00 per year (less than 25 employees)
- PATRON FRIEND** \$100.00 per year

I CAN HELP! Let us know what areas you would like to assist in.

- SERVE ON THE EXECUTIVE
- PLAN A PROJECT OR PROGRAM
- WORK AT A SPECIAL EVENT
- ORGANIZE A FUND-RAISING
- LET ME KNOW WHAT IS NEEDED

FRIENDS OF THE NORFOLK COUNTY PUBLIC LIBRARY

I would like to be associated with the following Branch:

- Delhi
- Port Dover
- Port Rowan
- Simcoe
- Waterford

**LEAVE THIS FORM WITH LIBRARY STAFF AND YOU WILL BE CONTACTED.
THANK YOU FOR YOUR SUPPORT!**