



Membership Form

To join the Friends, fill out this form, print, and turn it in or mail it to the library with your membership fee:

Date: _____

Name: _____

Street: _____

City/State/Zip: _____

Phone: _____

Email: _____

This is a New Membership or Renewal

Enclosed is my membership fee:

- | | |
|--------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Individual \$10 | <input type="checkbox"/> Business \$50 |
| <input type="checkbox"/> Family \$15 | <input type="checkbox"/> Patron \$100 |
| <input type="checkbox"/> Contributing \$25 | <input type="checkbox"/> Supporting Member \$75 |
| <input type="checkbox"/> Senior (Age 65 and older) \$5 | |
- My company will match my contribution (contact me for information)
- Please contact me about Volunteer Opportunities

Mail completed form with your membership fee to:
Friends of the Batavia Public Library
10 S. Batavia Ave.
Batavia, IL 60510-2793