



2015 Membership Application

Please check one:

- I would like to become an active member (I would like to attend monthly meetings and help with bi-monthly book giveaways).
- I would like to become a supporting member (I cannot attend meetings, but please accept my membership fees as a show of support).
- I would like to renew my membership.

Name: _____

Address: _____

Phone: _____

Email: _____

Membership Categories

___ Business \$100

___ Individual \$10

___ Family \$25

___ Sponsor \$75

___ Benefactor \$200

___ Other _____

Thank you so much for your support of
the Friends of the Wakulla County Public Library.

Checks can be made payable to "Friends of WCPL."

P.O. Box 1737

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FriendsWakullaLibrary@gmail.com