



MEMBERSHIP APPLICATION 2020

Thank you for your interest in joining the Friends of the Wakulla County Public Library! Please complete this form and mail with your payment to Friends of WCPL, P.O. Box 1737, Crawfordville, FL 32327, or drop at the library during open hours.

Name: _____ Date: _____

Address: _____

Phone: _____ *Email: _____

I am a new member _____ / past member _____

WCPL has permission to publicize my name ____ Yes ____ No

I am interested in ____ Volunteer Opportunities ____ Friends Meetings ____ Events

Membership Categories (check at least one)

____ Individual \$15 ____ Family \$25 ____ Best Friend \$50
____ Patron \$100 ____ Fellow \$150 ____ Benefactor \$250
____ Major Contributor \$500+ ____ Business Member Donation \$ _____

Join electronically at <https://www.paypal.com/fundraiser/charity/117188>

We are a tax exempt organization as described in Section 501(c)(3) of the Internal Revenue Code and no benefits are bestowed to donors other than the joy of giving to an organization that supports the programs and services offered by WCPL.

Contact us at 850-926-7415 or FriendsWakullaLibrary@gmail.com.

*All contacts and announcements are made by email.