Friends of Shannon Staub Public Library, Inc. **Membership Application**



Friends of Shannon Staub Public Library, Inc. Supporting Shannon Staub Library

SHANNON STAUB PUBLIC LIBRARY		١	Supporting .	mannon sia	iuo Library	/		
To become a me	ember of our Fri	iends g	roup, please	select a me	embership c	ategory belo	ow:	
r Friend r Family	\$25.00 \$30.00	r	Nonprofit Business			Benefactor	\$500.00	
Effective January 1, 2	2018 all new m	ıember	ships and/o	r renewals	will be for	a period of	one year.	
r YES!IV	want to contribut	te to Fr	iends of Sha	annon Stau	b Public Lib	orary, Inc.		
,	Amount of dona	ition :						
Please mak	ke checks paya	ble to:	Friends of S	hannon Sta	aub Public L	ibrary, Inc		
Name:							-	
Address:							-	
City:			State:		Zip:			
Phone:					Date			
Email:					Check #			
					Cash:			
I would like to hel	ip with: $ _{ m r}$		I Events		r Phone Ca	Directors	-	
Friends of Shannon Staub addresses for members' u below. All written commu	use only. If you d	lo not w	ant your nam					
r Do not include my	phone number	r Do	not include m	ny email add	ress r do	not include my	name	
			ternal Use Or					
Received by:		red by:			Date Deposi	ted:		
P.O. Box 7403 North Port Phone: (201) 832-8		cebook.c	www.friend com/friendsofs		ubliclibrary	libraryfriends@mail.com		
A copy of the official registration a obtained from the Division of Consu Registration does not imply endorse	umer Services by Calling	g Toll-Free	1-800-435-7352					

Revised: 2/17/2018 maw 12-10-2016