

WHITE COUNTY PUBLIC LIBRARY FRIENDS FOUNDATION, INC.

MEMBERSHIP FORM

NAME(S) _____

MAILING ADDRESS _____

PHONE (DAY) _____ (EVENING) _____

E-MAIL ADDRESS _____

Membership Library

(Half of your membership fees will go to the library fund indicated on this form.)

- ___ Baldwin Memorial Library (Judsonia) ___ Bradford Public Library
___ Goff Public Library (Beebe) ___ Lyda Miller Public Library (Bald Knob)
___ Pangburn Public Library ___ Rose Bud Public Library
___ Janett and Larry Crain Memorial Library ___ No designation (All will go to the Friends Foundation general account.)
___ El Paso Community Library

Annual Membership Categories

- ___ Sustaining \$120 or more per year OR \$10/month via online donation
___ Business \$50
___ Family \$25
___ Individual \$15
___ Senior Citizen (65+) \$10
___ Student (to age 22) \$10

Please Check One:
New Membership _____
Renewal Membership _____

___ I am enclosing a check for \$ _____ to cover the membership category checked above.

___ In addition, I am including a contribution of \$ _____ to the membership library checked above.

___ My employer matches employee contributions.

Name and address of employer: _____

MAKE CHECKS PAYABLE TO WHITE COUNTY PUBLIC LIBRARY FRIENDS FOUNDATION, INC.
MAIL TO:

WHITE COUNTY PUBLIC LIBRARY FRIENDS FOUNDATION, INC.
1609 W. BEEBE CAPPS EXPRESSWAY
SEARCY, AR 72143

The WCPL Friends Foundation is a 501(c)(3) organization and your donation is deductible to the full extent allowable by law. Our EIN is 46-5116537.

Would you be interested in serving as a volunteer? If so, indicate the type of activity.
___ fundraising event
___ promotional event (ex. Fair booth or community event)
___ book sale event
___ special library program event
___ Friends Book Store (locations in Searcy and Pangburn)

For more information, please call (501) 279-2870 ext. 124 or E-mail: Darla.Ino@Arkansas.gov