



Friends of the Library

Membership Form

Name: _____

Spouse: _____

If Family Membership, please list all names:

Address: _____

City: _____ ZIP Code: _____

Phone: _____

I would like to receive the library's newsletter by: *(please check one)*

Email

Mail

E-mail Address: *(for library use only)* _____

I want to join the Friends of the Pekin Public Library as a member **(please check one)**:

Individual \$1

Contributor \$5

Family \$10

Patron or
Business \$25

Sustaining \$50

Benefactor \$100

New

Renewal

I would like to help the Friends in the following:

Nominating Committee

Membership

Book Sales

Any Activity Where I am Needed

Please complete & mail or return to: Friends of the Pekin Public Library, 301 S. Fourth St., Pekin, IL 61554

Please make checks out to: Friends of Pekin Public Library