

## MARIPOSA COUNTY FRIENDS OF THE LIBRARY MEMBERSHIP

				Today's date:	, 2024
Name:				Phone:	
	se Print)		_		
Mailing Address:		City	<i>-</i> :	Zip:	
(Plea	se Print)				
( ) New Men	nber ()New	address E Mail:			
Membership	Categories	(Membership year is f	rom April 1, 20	024 to March 31, 2025	<b>;</b> )
Individual	•	Gold Friend	\$15.00	Golden Patron	
Family			\$25.00	Booster Ur	
Business			\$50.00	Life: Additional	Donation
Life	\$100.00	Gold Strike	\$75.00	Other	
Other Contrib	outions: (Inclu	de address for acknow	wledgement)		
Memorial for	(Name)	Gift	in Honor of (N	lame)	
		ble to: <b>Friends of the</b> proof of membership/o	•		•
I Would like	To Volunteer a	as Needed, to:			
	at May Book		_	n Annual Membership	•
	at October B		_	s for the Book Sales a	s Needed *
		tee: Book Sale, Public	-	g	
		Galore store Mon or F	,		
			must be	able to lift 25 lbs	

Comments: