

Annual Membership Form

Yes, I want to be a "Friend"

(please print)

New Renewal

Date: _____

Name(s): _____

Zip: _____

Phone: _____

We use email as our primary form of contact, we do not sell our email list.

Email Address: _____

Annual Membership Categories (per person, except for family membership)

Individual \$15

Family \$25

Lifetime \$300

Discounted \$10 (Circle One: Student/Seniors 55+/Library Staff/Book Outlet Volunteers)

Membership Amount: \$ _____

Additional Donation: \$ _____

Make check payable to: Friends

(if you would prefer to pay by cash, please stop by the store during regular hours to drop off your membership)

Mail to: Friends of the Aurora Public Library

2243 S Peoria St

Aurora, CO 80014

All membership fees and donations are tax deductible as allowed by law

THANK YOU!