Adair County
PUBLIC LIBRARY

Friends of the Library Membership Form:

Name:_____

Address:_____

_____

Email:_____

Phone:_____

Date:_____

Membership Category
____Individual.....$10
____Family.....$15
____Sustaining.....$25
____Patron.....$100

____Business/Organization....$30
____Business Patron.....$100

I would be willing to help the work of the Friends by
____Helping with weekly book sales
____Providing monetary support for Friends' projects
____Helping plan Friends' activities
____Other (please specify)_____

Mail to:
Friends of the Adair County Public Library
P.O. Box 883
Kirksville, MO 63501