

Friends of the Library Membership Form
Richmond Hill Public Library
P. O. Box 939, Richmond Hill, GA 31324

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (home): _____ Work: _____ Cell: _____

Email: _____

(We encourage members to give their email address, so FOL can save on postage, Thanks.)

Please check all which apply to you:

I can work on special projects (book sales, yard sales, etc.)

I am available to sort, label, and shelve books for the ongoing book sales at the library.

I am available to help as needed.

I will support FOL through my dues.

Please check one:

Individual Membership (\$20.00)

Family or Business Membership (\$30.00)

Patron (\$50.00)

Please make checks payable to Richmond Hill Friends of the Library and return both membership form and check to:

Friends of the Richmond Hill Library
C/O Richmond Hill Library
P.O. Box 939
Richmond Hill, GA 31324

Thank you for supporting the Friends of the Richmond Hill Library who work toward improving the library as a means of enhancing our community. Please encourage your friends and family to join us as we happily anticipate a new a larger library in the future.