Friends of the Bartow County Library System
MEMBERSHIP FORM

Name(s) _____

Address _____

City _____

State _____ **Zip** _____

Phone(s) _____

E-mail(s) _____

_____

Please circle your choice of Membership level: ***New or Renewal***

Individual - $10.00 Family - $20.00 Patron - $25.00 Donor - $50.00

Sponsor - $100.00 Sustaining - $250.00 Benefactor - $500.00

Additional contribution/donation amount: _____

Membership year begins October 1st, ends the following September 30th.
(FOL is a 501c3 nonprofit organization. Your contribution may be tax deductible).

***Circle choice of Friends Membership group*:** **Cartersville FOL** **Adairsville FOL**
Euharlee FOL

I would be interested in serving with one or more of the following:

Board of Directors Special Events Book Sales Craft Fair

Quarterly Programs Setup/Breakdown/Cleanup Refreshments

Public Relations Membership Drive Library Volunteer

Other _____

Check should be made payable to ***Friends of the Bartow County Library System***.
Completed membership form and check can be mailed or given to the Library Circulation Desk at: ***Friends of the Library, 429 W. Main Street, Cartersville, GA 30120***.