



# Friends of the Library of Lakeland, Inc.

## Annual Membership Application

Name: \_\_\_\_\_

Benefactor: \$100

Address: \_\_\_\_\_

Patron: \$50

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Family: \$25

Email: \_\_\_\_\_

Individual: \$10

Senior/Student: \$5

Date: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Please make all checks payable to: Friends of the Library, Inc.

Your membership is tax deductible to the extent permitted by law.

Please print, fill out and mail this form and payment to:

Friends of the Library

PO Box 2502

Lakeland, FL 33806-2502

A copy of the Friends' official registration & financial information may be obtained from the division of Consumer Services by calling toll-free within the state at 1-800-435-7352. Registration does not imply endorsement, approval or recommendation by the state.