

TOM GREEN COUNTY
FRIENDS 
OF THE LIBRARY

DATE: _____

Please mail form to P.O. Box 60421, San Angelo, TX 76906
 tgcfol@yahoo.com

Check if renewing membership

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ CELL PHONE: _____

EMAIL: _____@_____.

PLEASE SELECT ONE:

Individual membership: \$10.00 Family membership: \$25.00
 (Includes children under 18)

Individual LIFE membership: \$150.00 Family LIFE membership: \$300.00
 (Includes children under 18)

IF YOU WOULD LIKE TO VOLUNTEER, PLEASE CHECK:

Book Sale Sort Books
 Online Sales Book Store in Library

STAFF USE ONLY

Working Volunteer
 Contacted on: _____ By: _____

Trained on: _____ By: _____

Scheduled to Wk on: By: _____

cc:
 Jody _____
 Ann _____
 Lynn _____
 Jennifer _____
 Donna _____