

FORSYTH COUNTY PUBLIC LIBRARY
FRIENDS & ADVOCATES

MEMBERSHIP FORM

Please complete and mail your payment to:

FCPL FRIENDS AND ADVOCATES
585 DAHLONEGA RD
CUMMING, GA 30040

OR deliver payment in person to one of our three bookstores: Cumming, Post Rd or Sharon Forks

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

Annual Membership dues are listed below:

PHONE: _____

\$10 /yr _____ Seniors (age 50 and over)

EMAIL: _____

\$15/yr _____ Individual (age under 50)

\$20/ yr _____ Family (two or more persons residing at same address)

\$20/ 2 yrs _____ Seniors (age 50 and over)

\$30/ 2 yrs _____ Individual (age under 50)

\$40/ 2 yrs _____ Family (two or more persons residing at same address)

Cash payment amount _____

Checks are payable to FCPL FRIENDS & ADVOCATES Amount _____ Check # _____

I would like to make a donation to support the. FCPL programs. Amount _____ Check# _____
Cash _____

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I WOULD LIKE TO VOLUNTEER TO HELP

\_\_\_\_\_ In the Bookstores \_\_\_\_\_ Cumming \_\_\_\_\_ Post Road \_\_\_\_\_ Sharon Forks

\_\_\_\_\_ Special Events \_\_\_\_\_ Leadership position

Thank you for your support of the FORSYTH COUNTY PUBLIC LIBRARIES through the FRIENDS & ADVOCATES PROGRAM!!