Friends of the Weaverville Library
Membership Form

Name(s): ______________________________________________________________________

Street/P.O. Box: ________________________________________________________________

City: __________________________________________________________________________

State: ___________ ZIP: ____________ Phone: ________________________________________________________________________________

Email: ________________________________________________________________________

Membership:  □ Individual ($15)  □ Family ($25)  □ Business ($30)

Additional Donation: _______________

□ Please contact me about volunteering with the Friends.

   I want to help with:
   □ the used bookstore, hours to be determined
   □ other, please specify __________________________________________________

Three Options for getting this information back to the Friends:

1) If you would like to pay your membership fee through PayPal, hold down the CTRL Key and click:

   https://www.paypal.com/donate?hosted_button_id=ZSF2C3NFAKCLN

   (You will be prompted for your name, address, email address, and type of membership)

OR...

2) You can mail your membership form (with payment) to:

   The Friends of the Weaverville Library
   P.O. Box 663
   Weaverville, NC 28787

OR...

3) drop it off the next time you are in the library.

Thank you for your support!

The Friends of the Weaverville Library is a 501(c)3 non-profit membership organization.
All contributions are tax deductible.