



Friends of the Union Parish Library

Membership Application
(please print out and complete)

Name: _____ Date: _____
Address: _____
Telephone (home) _____ (work) _____
Email address _____

Do you want to be included in the monthly mailing list for “Friends” and the Union Parish Library? Circle one: Yes or No

Please indicate your choice of membership:

BRONZE _____ Individual (\$10)	PLATINUM _____ Business (\$100)
SILVER _____ Family (\$15)	DIAMOND _____ Patron (\$500)
GOLD _____ Literary/Civic Org. (\$25)	

Please make your check payable to: Friends of Union Parish Library. Please submit your check along with this application in person at the library or by mail to:

*Friends of the Union Parish Library
202 West Jackson
Farmerville, LA 71241*

Library services most used:

___ Book collection ___ Computers ___ Programs ___ Bookmobile
___ Periodicals ___ Newspapers ___ Office services (copy/fax)

Indicate your interest in one of the “Friends” committees below:

___ Executive Council ___ Nominating ___ Programs ___ PR/Publications
___ Fund-raising ___ Bylaws ___ Book Sale ___ Archives



Union Parish Library

Your CommUN TY Connection