

Friends of the John C. Hart Memorial Library
Membership Enrollment Form
June 1, 2017 – May 31, 2018

Membership: I/We would like to enroll as a member of the Friends of the John C. Hart Memorial Library:

Student/Senior: \$10.00 _____
Individual: \$15.00 _____
Family: \$20.00 _____
Other: _____

Donor: \$25.00 _____
Sponsor: \$50.00 _____
Donor Leaf: \$500.00 _____

(For this donation have your name permanently engraved on donor tree in Library.)

Please make checks payable to **Friends of the Hart Library**. You will receive by mail your membership card, a donation acknowledgement and 2 coupons for free books, CD or DVD at our daily or annual book sales. If available, please include a completed corporate matching form.

Please PRINT clearly.

Name(s): _____

Street/PO Address: _____

City/Town: _____

Phone: (____) _____ Email: _____

Return form(s) to the Library or mail to:

Friends of the Hart Library
John C. Hart Memorial Library
1130 E. Main Street
Shrub Oak, NY 10588

Volunteers: Are you interested in helping us with any of the following?

_____ 2017 Annual Book Sale **October 13 to October 16.**

_____ Bake Sale (Prepare a tasty treat for the Annual Book Sale.)

_____ Becoming a Board member (monthly meetings every 2nd Tuesday at time TBD).

_____ Volunteer to sort through our monthly donated books.

Comments: We welcome any ideas/suggestions you may have.

Thank you!