

North UC Friends Membership Form:

Date: _____ New _____ Renewal _____

Name _____

Address _____

City _____ State _____ Zip _____

Email address _____

Home Phone _____

Membership Levels

Please check one:

_____ Individual/per year ; \$5.00

_____ Sponsor/per year; \$25.00

_____ Individual Life Member*; \$250.00

_____ Benefactor*; \$500.00

_____ Patron/Donor*; \$1000.00

_____ Contributor/Business; \$100.00 (name below)

*entitled to a Life Membership

Please print out this form and send (secure website) with your credit card number to: _____

**Or you can print out this form and mail your check to:
Friends of the NU Community Library, PO Box 927781, SD, CA 92192-**

7781. Checks should be made payable to FSDPL/North UC Chapter.

Credit Card Information: Amount_____Date_____

Visa_____Mastercard_____Paypal_____

Signature_____

THank you for your support!