

## Bookmobile Friends of the Library Membership Form

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_

- \$3.00 **Individual**
- \$5.00 **Family**
- \$25.00 **Organization**

Make checks payable to:

**Friends of the Bookmobile.**  
and send your check to:  
**Peggy Reblin, Treasurer**  
**14285 Chagrin Woods**  
**Newbury, Ohio 44065**

- Yes**, I want to be contacted about volunteer opportunities.