



**2016 Membership Form
(expires Dec. 2016)
Please PRINT legibly**

Today's Date: _____

#1: Name: Mr. Mrs. Ms. _____

#2: Name: Mr. Mrs. Ms. _____

Street/P.O. Box: _____

City: _____ State: _____ Zip: _____

Home phone: (____) _____ Cell phone/Other: (____) _____

E-mail is required for member updates: _____

Payment (Check all that apply):

_____ Regular Membership (**\$10 per person** per calendar year) \$ _____
_____ Book Lover Sponsor (\$100 per calendar year) \$ _____
_____ Additional Donation to Friends \$ _____

Total Enclosed: \$ _____ **Check #** _____
Or \$ _____ **Cash**
Or \$ _____ **Credit Card at Book Sale**

Is this a renewal of your current membership? Yes _____ No, it's new _____

Please return this form with your payment payable to:

Friends of Keene Memorial Library 1030 North Broad St. Fremont, NE 68025

If called upon, I am willing to consider the following:

- Sort books for the Book Sale
- Volunteer at the Book Sale or Friends' Event
- Serve on the Friends' Board
- Serve on a Friends' Committee
- Provide baked goods for Event/Book Sale

I am willing to share my skills: (typing, organizing, publicity, cleaning, fund raising, grant writing, etc.) _____