



Friends of the East Parker County Library

Date: _____

☐ New Member

☐ Member Renewal

Please PRINT

Member Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Hm Phone: _____ Cell: _____

Work Phone: _____ Email: _____

Type of Membership

☐ \$5.00 Individual

☐ \$10.00 Family

☐ Other: _____

☐ Check # _____

☐ Cash

☐ Other: _____

Notes: _____