



Please enroll me as a Friend of the Library:

- | | |
|--|---|
| <input type="checkbox"/> New | <input type="checkbox"/> Renewal |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Senior/Student \$5 |
| <input type="checkbox"/> Individual \$10 | <input type="checkbox"/> Family \$15 |
| <input type="checkbox"/> Sustaining \$25 | <input type="checkbox"/> Contributing \$50 |
| <input type="checkbox"/> Corporate \$100 | <input type="checkbox"/> Patron \$250 |

Name _____

Address _____

_____ Phone _____

Checks payable to:

Friends of Missoula Public Library
301 East Main
Missoula, MT 59802