

Friends of the Presque Isle Community Library Membership Form

Name _____

Mailing Address _____

City, State, Zip _____

Email Address _____

Suggested donation levels:

_____ \$15 _____ \$25 _____ \$50 _____ \$100 _____ \$1000 Lifetime Membership

_____ Other amount (any contribution is appreciated)

Please make check payable to **Friends of Presque Isle Community Library or FOL**
Return this form to: **P.O. Box 200, Presque Isle, WI 54557**

FOL are a 501(c)(3) organization so all contributions are tax deductible.