



Membership Application

Join the Friends of the Durham Library today!
(or renew your membership)

Date: _____

Name: _____

E-mail: _____ Phone #: _____

Address: _____

City/State: _____ Zip code: _____

Level of Membership

(circle one)

Annual: Individual: **\$15.00** Senior (over 65): **\$10.00** Youth (18 and under): **\$5.00** Family: **\$25.00**

Patron: **\$30.00** **\$50.00** **\$100.00** Additional contribution \$ _____

Lifetime: Individual: **\$375.00** Additional contribution \$ _____

If payment made in person, please check one: ___ cash, ___ check, ___ credit card

If you are mailing this in, please make your check payable to and mail with this form to:

Friends of the Durham Library

P.O. Box 2475

Durham, NC 27715

Questions? Contact FoDL Membership Chair at 919.907.1106 or membershipFODL@gmail.com