



Friends of the Riverside Regional Library of Perryville Membership Form

Date _____

Name _____

Address _____

City, State, Zip _____

Telephone number _____

Email _____

Type of membership – check one:

Individual \$5 per year

Family \$10 per year

Business membership \$25 per year

Please check how you want to be kept informed of the Friends of the Library activities:

by email by phone by mail

Please make checks out to: Friends of the Library @ Perryville

Please mail this form and your check to Riverside Regional Library @ Perryville
(Please put Perryville Friends in the memo line on your check)

If you have questions, contact Melissa Haymaker at 573-547-6508

Additional tax-deductible donation enclosed: \$ _____

Check here if you would like to receive a letter acknowledging this donation