



Friends of the Library @ Scott City

Membership Form

Date _____

Name _____

Address _____

City, State, Zip _____

Telephone number _____

Email _____

Type of membership – check one:

Individual

Family

Business membership

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

by email by phone by mail

Please mail this form and any donation to Scott City Friends of the Library
2801 Main St, Scott City, MO 63780

If you have questions, contact Joyce Luten 573-264-2413

Tax-deductible donation enclosed: \$ _____

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