

Become a Friend
of Seymour Library



Name: _____

Address: _____

Phone: _____

E-Mail: _____

Annual Membership Dues

- | | |
|---|------|
| <input type="checkbox"/> Student/Senior | \$15 |
| <input type="checkbox"/> Individual | \$20 |
| <input type="checkbox"/> Family | \$30 |
| <input type="checkbox"/> Business | \$50 |

I am:

- Able to attend meetings
(usually 3rd Wednesday of month at 6 p.m.)
- Help with programs
- Unable to help at this time but
wish to provide financial support

Please make checks payable to:

Friends of Seymour Library

Mail to: Seymour Library, 176-178
Genesee St., Auburn, NY 13021

Thank you!