

Friends of the Brunswick-Glynn County Library

My check for \$_____ is enclosed for annual membership in Friends of the Brunswick-Glynn Library.

Individual	\$10	Supporting	\$50	Life	\$500 and higher
Family	\$20	Patron	\$100		

(Ms.) (Mr.) (Mrs.) _____ Telephone _____

Street _____ City, State, Zip _____

Please check area(s) of special interest in which you would be willing to serve:

<input type="checkbox"/> Book Fairs	<input type="checkbox"/> Membership	<input type="checkbox"/> Tables of Content Benefit
<input type="checkbox"/> Mailings	<input type="checkbox"/> RIF Children's Program	<input type="checkbox"/> Hosting Receptions

Please return this form with your check to the

FRIENDS OF THE BRUNSWICK-GLYNN COUNTY LIBRARY
208 Gloucester Street
Brunswick, GA 31520