

Friends of the St. Paul Public Library

We would like you to join us in our efforts to support the St. Paul Public Library. Please complete this form and return to:

*Bonnie Rodgers, Library Director
St. Paul Public Library
PO Box 123
St. Paul, AR 72760
library72760@gmail.com*

NAME: _____
DATE: _____
EMAIL: _____
PHONE: () - _____
ADDRESS: _____

Preferred Method of Contact

- Email
- Mail
- Phone

Please check all that apply:

- Become a member of the Friends of the St. Paul Public Library

Membership Desired (Annual):

- Individual \$5
- Student \$2
- Sponsor \$25
- Business/Association \$50
- Lifetime \$100

I am interested in:

- Making a onetime financial contribution. Amount of gift: \$_____
- Helping in another way. Please list: _____

- Programs that I would like to see at the library: _____

- Programs that I could present at the library: _____

Please contact me about:

- Regular Meetings
- Special Programs
- Fund-Raising Events