

NOTE:

This is a type-on form.

Enter info, save and
print as needed.

DONATION / MEMBERSHIP RENEWAL FORM

Last Name

RETURN COMPLETED FORM TO:
THE FRIENDS OF THE SPICEWOOD COMMUNITY LIBRARY
P.O. Box 463
Spicewood, TX 78669

A. Donation:

I (we) would like to support the Spicewood Community Library by making a donation.

Suggested tax deductible donations:

<input type="checkbox"/> Individual - \$25 to \$39	<input type="checkbox"/> Silver Patron - \$200 to \$499
<input type="checkbox"/> Family - \$40 to \$49	<input type="checkbox"/> Gold Patron - \$500 to \$999
<input type="checkbox"/> Bronze Patron \$50 to \$199	<input type="checkbox"/> Platinum Patron - \$1000 +
<input type="checkbox"/> Other Amount <u> \$ </u>	

B. FRIENDS of the SPICEWOOD COMMUNITY LIBRARY:

The Friends of the Spicewood Community Library, Inc. is a 501(c)(3), tax exempt corporation that owns and operates the library. The library receives no support from any government entity and relies solely on fundraising activities, donations, and memberships. Please join us in supporting the Spicewood Community Library. Your membership for the fiscal year (Oct 1 to Sep 30) entitles you to a vote at issues brought before the membership at our annual meeting (every August), periodic updates of our progress in further developing the library, and the rewarding knowledge that you are supporting a truly worthy community cause.

Yes! I would like to join the Friends of the Spicewood Community Library. Please, use my donation of \$25 or more from Section A above as my dues for the upcoming fiscal year. _____

(Initials)

I would also like to help with:

Volunteer work in the library Help with Fundraising _____

(Initials)

C: CONTACT INFORMATION:

Name (Last, First): _____

Mailing Address: _____

City/St/Zip _____

Phone: _____ Email: _____

**Thanks from the
Friends of the Spicewood Community Library**

Check #:	_____
Amount:	_____
Date:	_____