Join the Friends

2018 Membership Application
January 1, 2018 through December 31, 2018

Date_____

_____**Renewing ___ New Membership**

Yes, I would love to bake! _____
(Spring and Fall Bake Sales) Please contact me by phone____e-mail____

NAME _____

_____
Street Address

_____
City State Zip

Daytime Phone:_____

Evening Phone: _____

E-MAIL_____
Would you like to receive your 2018 membership confirmation by e-mail? Y / N

_____**SPONSOR Membership $35***
*Includes Friends tote bag

_____**FAMILY $20**
Harborfields Resident Membership

_____**INDIVIDUAL Harborfields Resident Membership $10**

_____**OUT OF DISTRICT Membership $25**

Please make checks payable to:
Friends of the Harborfields Public Library
Mail to: **Friends Membership**
c/o Harborfields Public Library
31 Broadway, Greenlawn, NY 11740

Most Friends of the Library meetings are on the first Monday of each month at 7:30 PM. Check the newsletter for exact dates. All are welcome!