



FRIENDS

of the
Superior Public Library

Membership Form

BE A FRIEND of the SUPERIOR PUBLIC LIBRARY MEMBERSHIP FORM

Membership encompasses one calendar year (January 1 to December 31).

Bring or mail to Friends of the Superior Public Library, 1530 Tower Avenue, Superior, WI 54880

NAME: _____ DATE: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

DAY PHONE: _____ EVENING PHONE: _____

EMAIL ADDRESS _____

Please check desired membership term:

Business/Organization: _____ \$25.00 (1 year)

Family: _____ \$15.00 (1 year)

Individual: _____ \$10.00 (1 year)

Student: _____ \$ 5.00 (1 year)



How do you prefer to receive the Friends of the Superior Public Library Newsletter?

_____ Email
_____ U.S. Postal Service

I wish to make a tax-deductible gift to the library in the amount of \$ _____.

If you would like to become an **Active Member**, please come to the Library. Work days are every Monday and Wednesday from 10:00 am to noon unless the Library is closed.

The Friends do many things to show their support of the Superior Public Library:

- We accept and sort donations of used books throughout the year, hold two annual book sales and maintain the Friends Book Corner.
- Every year we donate thousands of dollars to enhance the library's collections, equipment, and services.
- We fund the online resources, Mail Chimp and Book Page, and assist with planning for programs and special events.

Please help your Superior Public Library maintain its important place in our community.