

FRIENDS OF THE LIBRARY, STATE COLLEGE OF WASHINGTON

Enclosed is my check for \$_____in support of my membership application to Friends of the Library, State College of Washington. I am joining the organization as:

- ____ Annual member (\$3.00 per year)
- ____ Contributing member (\$5.00 per year)
- ____ Sustaining member (\$10.00 per year)
- ____ Patron member (\$25.00 per year)
- ____ Life member (\$100.00)
- ____ Memorial membership (more than \$100.00)

(Please make checks payable to Friends of the Library and send with this application to the Secretary, Friends of the Library, Pullman, Washington.)

Signed _____

Address _____
