

Name _____ Date _____

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I am enclosing \$ _____ to cover the annual membership indicated. Make checks payable to **Friends of the Bettendorf Public Library** and mail or deliver to: Bettendorf Public Library, 2950 Learning Campus Drive P. O. Box 1330, Bettendorf, IA 52722. (563) 344-4177

ANNUAL DUES

____ Individual \$5
____ Family \$10
____ Supporting \$25-49
____ Patron \$50 or more

____ I would like to work on Friends projects. (Book Fairs, Magazines)

I would like to help cut library costs. Please email me the "Pages."

My email address is: _____

____ I do not currently receive the "Pages" newsletter and do not have Internet services. Please mail.

____ I currently receive the "Pages" newsletter.

Membership dues to the Friends are not tax deductible.