

Friends of the Canyon Area Library
Membership Application

Name: _____

Address: _____

Telephone: _____

E-mail: _____ (for news bulletins)

Dues are collected for the support of the library.

Please check the amount of your annual gift. Check () or Cash ()

_____ \$ 5 Family

_____ \$10 Supporting

_____ \$ 20 Sustaining

_____ \$25 Corporate

THANK YOU FOR YOUR HELP!

Please mail or deliver to:

Canyon Area Library 1501 3rd Avenue Canyon, TX 79015

Please call me to volunteer. I can help with:

_____ Volunteer in bookstore

_____ Help with Scholastic Book Fair during Summer Reading Program

_____ Help with Book Sales

_____ Assist with the CISD Librarians Luncheon

_____ Help with various fund raising events

For Friends use:

Check No.: _____ Date: _____ Event: _____ R or N