

YES! I want to be a Friend of the Solvay Public Library!

Enclosed are my annual membership dues:

- \$5 Individual
- \$10 Family
- \$100 Lifetime (per individual)
- Free for Students
- I do not want to be a member, but enclosed is my contribution of:

\$ _____

- My business would like to contribute: \$ _____

- Yes! I want to be an active member.

Please contact me at:

Name _____

Address _____

Phone _____

Email _____

Application Date: _____

Return to

Friends of the Solvay Public Library
615 Woods Road, Solvay, NY 13209