

MEMBERSHIP APPLICATION

Membership Type:

- Student / Senior (**circle one**) \$25/yr
 Regular \$40/yr
 Household (2 people/same address) \$60/yr
 Supporting \$125/yr
 Life \$1,000



() I'd like to make an additional donation of \$ _____

Total amount of money included with application
(application and donation): _____

Name _____

Address _____

City _____ ZIP _____

Telephone (_____) _____ - _____ E-mail _____

Second Name _____ Email _____
(for household membership)

School _____
(for student membership)

As a member of the Quatrefoil Library, I agree that I am responsible for the return of all borrowed materials when due and I agree to pay promptly any fines or replacement costs for late, damaged, or lost material.

Signature _____ Date: _____

Membership information is held confidentially; not shared with any other group.

Check here if you **do not** wish to receive any mail from the library (newsletters, membership card, event notices). (If you have checked the box above, your membership card will not be mailed to you. You may pick it up at the library in approximately four weeks.) **However**, even if you check the above box, we retain the right to mail you notices of overdue material.

THANK YOU FOR YOUR MEMBERSHIP!

Please use the carbon receipt, with your 4 digit membership number as your temporary membership card when visiting the library.

Quatrefoil Library is a 501(c)(3) nonprofit organization. Membership donations are tax deductible.

For Library Use Only:

Date Received: _____ Volunteer initials _____ Database _____

Cash CC Check # _____ Cards _____

Membership Number 1 _____

Membership Number 2 _____

Rev. 01/2012

www.qlibrary.org—view catalog / new membership benefits