



Friends Membership Application

For my membership in Friends of Worcester Public Library, Inc., I am enclosing a tax deductible contribution. (If by check, please make payable to Friends of Worcester Public Library, Inc.)

Name: Mr. Mrs. Miss Ms.

Mailing Address:

Cite: _____ **State:** _____ **Zip Code:** _____

Classes of membership according to contribution:

Sustaining \$10

Supporting \$25

Patron \$50

Benefactor \$_____

My Company's Matching Gift form is enclosed

Friends periodically publish a list of members. If you prefer not to have your name published check here.