

YES! I want to become a Friend.

My check, payable to The Friends of The Brookfield Library, Inc., is enclosed.
Contributions are tax deductible, and may be eligible for matching grants.

Name _____
Address _____
Phone _____
Email _____

Please select your membership category:

- Friend (\$25)
- Good Friend (\$35)
- Very Good Friend (\$50)
- Best Friend (\$100 or more)
- Lifelong Friend (\$1,000+)
- Other \$ _____

- I would like to volunteer to help:
 - at the book sale in Sept./Oct.
 - during the year

Please return this form with your check (payable to The Friends of The Brookfield Library) to:

The Friends of The Brookfield Library
c/o The Brookfield Library
182 Whisconier Road
Brookfield, CT 06804