



Friends of the
North University City Community Branch Library
Membership Form

Date _____ New Renewal Address Change

Name _____

Address _____

City _____ State _____ Zip _____

Email address _____

Home Phone _____

Membership Levels

Please check one:

- | | |
|---|---------------|
| _____ Sponsor | \$50 |
| _____ Family (Dual Adult) | \$20 |
| _____ Individual Adult | \$10 |
| _____ Individual Senior/Student | \$5 |
| _____ Individual (Life Member) | \$250 |
| _____ Contributor/Business | \$100 |
| _____ Patron (Life Member) | \$1000 |
| My Company _____ | matches gifts |

Checks should be made payable to: **FSDPL/North UC Chapter**

Print out this form and mail your check to:

Friends of NUC Library
P.O. Box 927781
San Diego, CA 92192-7781

Thank you for participating in the Friends' support of the North UC Library!