

We want you to join.....

"The FRIENDS of the VALLEY PUBLIC LIBRARY"

YES! I would like to join!

COST per household or business: \$5.00

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL: _____

HOME PHONE: _____ CELL: _____

Please return this form with your \$5.00 dues to:



Friends of the Valley Public Library
% Betty Willmer, Treasurer
PO Box 5
Valley, NE 68064

or return to the Valley Library

Future projects of the Friends of the Valley Public Library include:
Christmas Bake and Book Sale * Fundraising * Children's Reading Programs * Advocacy

I would enjoy helping with _____.

Signature: _____ Date: _____