

Closter Public Library

Friends of the Closter Public Library *Membership Form*

First Name: _____

Last Name: _____

Address: _____

City: _____

Zip Code: _____

Phone Number: _____

Email Address: _____

Type of Membership:

- Individual (\$25.00)
- Family (\$50.00)
- Contributing (\$100.00)
- Sustaining (\$200.00)
- Patron (\$400.00)
- Lifetime (\$1,000.00)

**Please include a check for the appropriate amount made payable to FRIENDS OF THE
CLOSTER PUBLIC LIBRARY and mail or deliver to:**

The Closter Public Library
280 High St.
Closter, NJ 07624