



Friends of TADL Membership Renewal Form

Please complete items below and return this form and payment to the Main Library service desk, or mail to: Friends of the TADL 610 Woodmere Ave., Traverse City, MI 49686.

Name(s):

Note: if requesting a Family Membership, please list all people in same household you want included:

Address:

City/State/Zip:

Phone:

Email Address (required to send membership confirmation):

Membership Type (Tax Deductible Donation):

_____ \$15 Single Membership

_____ \$25 Couple/Family (one address)

Would you like to make an additional donation to the Friends of the Traverse Area District Library?

\$_____ Other donation

Payment method: Cash Check

New Member

Renewal Membership

Are you interested in being contacted about volunteer opportunities (e.g., book sales, sorting, distributing surpluses, interest in serving on Friends board, etc.)? **yes** **no**