

**TRAILS REGIONAL LIBRARY FOUNDATION
MEMBERSHIP APPLICATION**

Date:

Name _____

Address _____

City _____

State _____ **Zip** _____

Phone _____

Email _____

Branch Affiliation

- Concordia Corder
- Knob Noster Holden
- Odessa Lexington
- Waverly Warrensburg
- Undesignated

Level of Membership

- \$5 Library Friend
- \$25 Library Family
- \$100 Business Friend
- \$500 Library Ambassador

All dues and contributions are tax deductible.

Would you like to help?

- Spring Book Sale
- Fall Book Sale



Please return completed application and cash, check, or money order to your local branch or mail to:

Trails Regional Library Foundation

Attn: Director

432 N Holden St

Warrensburg, MO 64093

OFFICE USE ONLY

New Application

Renewal

Date Received:

Check # _____ Cash

Amount Received: