

**Yes, I want to be a Friend of the
Snohomish Library.**

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Email: _____

Annual Dues:

Student/Senior:	\$5.00
Individual:	10.00
Family:	15.00
Memorial/Donation:	\$ _____
Total Paid:	\$ _____
Date:	_____

I would like to help with:

- Membership
- Publicity
- Telephoning
- Other: _____

For more information, call the
Snohomish Library: 360-568-2898

Friends of the Snohomish Library
311 Maple Avenue
Snohomish, WA 98290
snofosl@hotmail.com