

Become a Friend of the Prescott Public Library

Full Name:

Street Address:

City:

Zip Code:

Telephone:

Your membership is a
gift from:

(We will notify the above recipient of your gift)

: \$10 -- Individual

: \$25 -- Family

I have added an extra
donation of \$

: I am interested in being a library volunteer.

Mail Payment with this form to:

Friends of the Prescott Public Library

215 E Goodwin Street

Prescott, AZ 86303