FRIENDS OF THE CAMDEN LIBRARY, Inc.

REGISTRATION FORM

I believe I am being invited to make the world a better place and have an opportunity to make an impact.

Name:			
	Individual / Family / P	Business/ Organization	
Address:			
	Street		
	City	State Zip	
Phone:			
	Home	Cell or Work	
Email:			
	e e	s in the year(s) July 1, 20 to June 30, 20 \$15 annually membership rate.	
	New Member	Renewal Member	
I would lik	te to make an additional (Please make checks pay	Contribution of \$ vable to the Friends of the Camden Library or FOL	
Allı	monies and all donations to th	he Camden Friends are tax deductable (donation forms available)	
You may j	mail your checks	c Library (252-331-2543), at Friends of the Library meets to: FOL, PO Box 190, Camden, NC 27921 Received:	ing, or
Meetin	os are held the ^{9nd} Monda	ay of each month at 3:00 p.m. at the Camden Library un	less

Meetings are held the 2nd Monday of each month at 3:00 p.m. at the Camden Library unless otherwise announced

Giving is a joyous experience that feels good to the donor.

The Friends of the Library's Goals are:

- ❖ To foster closer relations between the Camden Library and the Community.
- To promote informed interest in the function, resources, services, and needs of the library.
- To raise monies to benefit the Camden Library and treat the donors with respect and care, sharing our passion and invite those to be the solution while making our donors feel like superheroes.
- ❖ To be organized exclusively for the purpose of a charitable organization.