

Mail completed form to:
Lake County Public Library
1919 W 81st Ave
Merrillville, IN 46410

Yes, I want to be a Friend!
_____ New _____ Renewal

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Please check one:

_____ \$5 Individual _____ \$10 Family _____ \$100 Life Member

Please send me more information on the Friends of Lake County Public Library. I am interested in:

- _____ Learning more about the library
- _____ Working in the Book Sale Room
- _____ Working at Book Sales
- _____ Other volunteer opportunities