



Booth & Dimock Memorial Library 2021 Membership Drive

- ___ \$20 Individual
- ___ \$30 Family
- ___ \$50 Supporting
- ___ \$100 Sustaining
- ___ \$250 Platinum
- \$ ___ Other

Donor Name(s): _____

Please clearly print name(s) as you wish to appear for recognitions.

Address: _____

Telephone: _____

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This gift is given anonymously: ____

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