

Membership Committee use
Receipt and acknowledgment
sent:

BECOME A FRIEND OF THE COASTAL BRANCH LIBRARY

- I/we want to become a new member of the Friends of the Coastal Branch Library.
- I/we want to renew membership with the Friends of the Coastal Branch Library.

Date: _____

Name: _____

Address: _____

Phone # _____

E-mail _____

You will receive the Friends' Newsletter "Sea Oats" by email.

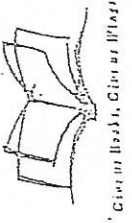
Enclosed is my tax-deductible contribution to the Friends of the Coastal Branch Library in the amount of:

\$20 \$35 \$50 \$100 Other _____

Please make your check payable to the Friends of the Coastal Branch Library and mail to:

Friends of the Coastal Branch Library
P.O. Box 1174
Santa Rosa Beach, FL 32429

Florida Department of Agriculture and Consumer Services license #CH14208
A copy of the official registration and financial information may be obtained from the Division of Consumer Services by calling 800-435-7333 toll free within the state or by visiting the website at <http://csp1.fdot.com/800diversign.htm>. Registration does not imply endorsement, approval, or recommendation by the state.



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