



OPL FRIENDS  
APPLICATION FORM 2015  
(PLEASE PRINT CLEARLY)



Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**I am interested in assisting in the following areas:** *(Please check all that apply)*

- Used Book Sales       Advocacy       PR & Marketing       Fundraising
- Volunteering at the Library       Being on the FOL Board       I cannot help at this time

**Annual Membership Dues:**

- \$10 (Individual)       \$20 (Family)       \$50 (Business / Vendor)
- Cash       Check (Made payable to: Oxford Public Library Friends)

Please Mail To:  
Oxford Public Library Friends  
C/O Oxford Public Library  
PO Box 538  
Oxford, MI 48371

Date Application & Dues Received \_\_\_\_\_

Oxford Public Library  
530 Pontiac Rd., Oxford MI 48371  
248-628-3034