

Mail completed form to:  
Lake County Public Library  
1919 W 81<sup>st</sup> Ave  
Merrillville, Indiana  
46410

Yes, I want to be a Friend!  
 New  Renewal

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please check one:

\$ 5 Individual  \$ 10 Family  \$ 15 Sponsor  \$ 100 Life Member

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

- Knowing more about the library
- Working in the Book Sale Room
- Working at Book Sales
- Other
- Helping at fundraisers