

ANNUAL MEMBERSHIP (July-June)
Friends of the Framingham Library Association

Friend \$12____ Supporting \$50____ Corporate \$100____
Senior (65+) \$8____ Patron \$75____
Family \$25____ Benefactor \$100____

Please contact your employer for a matching gift.

Name_____

Name of Corporation_____

Corporate website_____

Address_____

E-Mail_____

Phone #_____

Please make checks payable to THE FRIENDS OF THE FRAMINGHAM LIBRARY. Mail to:
Nancy Grifone, Treasurer; 1 Crosby Circle; Framingham, MA 01701.



**FRIENDS of the
FRAMINGHAM
LIBRARY**
