



FRIENDS OF THE
Ayer Library

Membership Form 2020

Name(s): _____

Address: _____

Email/Phone: _____

(Optional) I would like to help with (circle as many as you wish):

Garden Sale Events Publicity Fund Raising Just contact me. I want to help!

(Optional) I would like to make an additional donation of _____

Calendar year dues are \$10. Pay with check (payable to the Friends of the Ayer Library) or cash. Mail this form and your payment to The Friends of the Ayer Library, 26 East Main Street, Ayer MA 01432. Thank you!