

Friends of the Crown Point Library

2026 MEMBERSHIP FORM

☐ **New Member** ☐ **Renew my membership**

☐ **\$15 Adult Single** ☐ **\$25 Adult Family** ☐ **\$150 New Lifetime**
(2 members)

I would like to make an additional donation of \$_____

In honor of _____

TODAY'S DATE _____

First Name _____

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If purchasing a Family membership, please print the name for the second card

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City _____ State _____ Zip _____

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☐ **Subscribe to the Library's monthly newsletter**

☐ **Yes, contact me to volunteer at an event**

FRIENDS OF THE CROWN POINT LIBRARY

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www.crownpointlibrary.org/library-friends



FRIENDS

of the

Crown Point Library