

Marine City Public Library

Friends of the Library Membership Form

Make checks payable to Friends of the Marine City Library

Name: _____

Address: _____

Phone: _____

Email: _____

- | | | |
|--------------------------|-----------------------|-------|
| <input type="checkbox"/> | Student | \$3 |
| <input type="checkbox"/> | Adult | \$5 |
| <input type="checkbox"/> | Senior (62) | \$3 |
| <input type="checkbox"/> | Family | \$10 |
| <input type="checkbox"/> | Business/Organization | \$25 |
| <input type="checkbox"/> | Benefactor | \$50 |
| <input type="checkbox"/> | Patron | \$100 |

Marine City Branch
St. Clair County Library System
300 S. Parker
Marine City, MI 48039
810-765-5233

www.marinecity-mi.org/library.htm

www.sccl.lib.mi.us