

Organization Membership Form 2024

Please Print Neatly

Organization Name:			
Organization Mailing Address:			
City: State		e:	Zip:
Organization Email:			
Organization Membership Levels			
	Patron	\$500	
	Corporate	\$250	
	Sponsor	\$125	
	501(c)(3) Affiliate (tax paperwork returned by March 1, 2024)	\$125	
	501(c)(3) <i>Affiliate (tax paperwork</i> returned by April 1, 2024)	\$175	
	Friends Group	\$50	
Membership Amount:			\$
Donat	ion (Optional)		
Educational and Legislative Efforts Amount:			\$
Total Amount Enclosed			\$
	I		1
	Method of payment	Paypal	□ Check #
	Please make checks payable to Penns and mail along w PCI P.O. Box	ith this form to: BL	for Better Libraries
Pittsburgh, PA 15241			
OR			

Pay by **PayPal** by visiting **pcblpa.org/membership-fees AND** mail or email this form to us.