

# Friends of Charlotte Hobbs Memorial Library Membership Form

Name(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

I/We would like to support the Friends of Charlotte Hobbs Memorial Library with the following donation of:

Student \$5-24

Supporter \$100-\$499

Individual \$25-39

Patron \$500-999

Family \$40-99

Benefactor \$1000 and up

Business \$250 and up

My annual contribution for 2023 is \$\_\_\_\_\_

\_\_\_ I/We wish to keep my/our contribution anonymous

\_\_\_ I/We would like to receive the Library's emailed monthly newsletter

\_\_\_ Call or email me/us for possible volunteer opportunities with the Friends

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Please mail your check and completed Membership Form to:

Friends of Charlotte Hobbs Memorial Library, P. O. Box 105, Lovell ME 04051

*Checks should be made out to Friends of CHML*

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For Membership questions or questions about the Friends: [friends@hobbslibrary.org](mailto:friends@hobbslibrary.org)

*Friends of Charlotte Hobbs Library is a 501(c)(3) nonprofit organization dedicated to supporting the mission of the Charlotte Hobbs Memorial Library by raising money and public awareness in our communities and beyond.*

*No goods or services are provided by the Friends of Charlotte Hobbs Library in return for your contribution.*

# Friends of CHML "Gift" Membership

Your Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Amount of my gift/donation: \_\_\_\_\_

Please check off whether you are making a **gift membership** **OR** a **special occasion gift** in honor of a friend of family member and provide email text if you would like a message sent.

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\_\_\_ I/We would like to give a **gift membership** to the Friends of the Charlotte Hobbs Memorial Library for 2023 to:

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Student \$4-24

Supporter \$100-\$499

Individual \$25-39

Patron \$500-\$999

Family \$40-99

Benefactor \$1000 and up

Business \$250 and up

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\_\_\_ I/We would like to **celebrate a special person or occasion in honor of:**

Name \_\_\_\_\_

This gift honors:

A birthday

An anniversary

The birth of a child

A retirement

The memory of

Other

Send a gift announcement to:

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

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Email message you would like sent: \_\_\_\_\_

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Make check payable to Friends of CHML and mail with Gift Membership Form to Friends of CHML, P.O. Box 105, Lovell, ME 04051

**Questions?** Email [friends@hobbslibrary.org](mailto:friends@hobbslibrary.org)