Individual Membership Form

Individual Name: ____________________________________________

Address: ____________________________________________________

City: ___________________________  State: ________  Zip: _________

Email: ______________________________________________________

Individual Membership Levels

☐ Benefactor  $1,000
☐ Patron       $500
☐ Sponsor      $125
☐ Sustaining   $60
☐ Personal     $25

Donation

☐ Educational and Legislative Efforts Amount  $________

Please make checks payable to Pennsylvania Citizens for Better Libraries
and mail along with this form to:

PCBL
P.O. Box 551
Mountain Top, PA 18707