



**Friends of the  
Hussey-Mayfield  
Memorial  
Public Library**

250 North Fifth St.  
Zionsville, Indiana

***Please make check payable to:***

**FRIENDS OF THE LIBRARY  
PO Box 840  
Zionsville, IN 46077**

*Checks may be left at the  
circulation desk in the Library.*

**MEMBERSHIP APPLICATION / RENEWAL**      *Date* \_\_\_\_\_

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

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

***(Please check all boxes that apply)***

***This is a***

- New Membership       Renewal Membership

***Please choose one of the following Membership levels. Fees are due each September.***

- Individual    \$10.00       Benefactor    \$50.00\*
- Family        \$20.00

\*A portion of this amount will be used to purchase a book for the Library's collection in the name of the benefactor.

- I would like to help with the Friends Book Sales.
- I would like a reminder of meetings.