**Friends of Wentworth Library Service**

 **MEMBERSHIP RENEWAL OR APPLICATION**

**Name: Address:**

**Phone:**

**E-mail:**

**Payment: Single $5.00 Family $10.00**

**Please tick if you can help with any of the following: □ Book shelving, □ Book covering,**

**□ Sewing library bags, □ New book list, □ FOWLS Footy tipping □ Children’s activities.**

**OFFICE USE:**

**Branch: Rec. No: Date:**