



SCENIC REGIONAL LIBRARY

FRIENDS OF THE LIBRARY MEMBERSHIP APPLICATION

October 1, 2026 – September 30, 2027 Membership Year

All information submitted is considered confidential and will never be given or sold to any other individual, company, or organization.

If this membership is for you, please provide your information; if this membership is a gift for someone else, please provide their information:			
FIRST NAME	MIDDLE INITIAL	LAST NAME	
If this is a family membership:			
NAME(S) OF FAMILY MEMBER(S) (SPOUSE AND/OR MINOR CHILDREN)			
STREET ADDRESS		CITY	
STATE		ZIP CODE	
PHONE NUMBER		EMAIL ADDRESS	
If this membership is a gift for someone else, please provide your information:			
FIRST NAME	MIDDLE INITIAL	LAST NAME	
STREET ADDRESS		EMAIL ADDRESS	PHONE NUMBER
BRANCH AFFILIATION (Please select one)		LEVEL OF MEMBERSHIP	
Hermann Branch ☐	Sullivan Branch ☐	Individual - \$15 ☐	
New Haven Branch ☐	Union Branch ☐	Family or Organization - \$25 ☐	
Owensville Branch ☐	Warrenton Branch ☐	Library Supporter - \$50 ☐	
Pacific Branch ☐	Wright City Branch ☐	Lifetime Donor - \$500 ☐	
St. Clair Branch ☐		(includes \$150 voucher for donor wall book)	
WOULD YOU LIKE TO HELP? (Select all which apply)		OFFICE USE ONLY	
Volunteer at the Fall Book Sale ☐		☐ New Application	
Volunteer at the Spring Book Sale ☐		☐ Renewal	
Volunteer at other events ☐		Date Received:	
Volunteer at my local branch ☐		Check # _____ ☐ Cash	
Serve on the local Friends of the Library's ☐		Amount Received:	
Governing and Planning Committee ☐			

Mail this form (or drop it off at your local branch) with your personal check or money order to:
 Friends of the Library, 251 Union Plaza Dr., Union, MO 63084
Membership dues and contributions are tax deductible.