Friends of Goleman Library Membership Form

Name: _____

Organization: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone Number: _____

E-Mail Address: _____

I would like to assist in the following areas: _____

_____

I have enclosed a check for annual membership in the following category:

◯ **Students** ($5.00)

◯ **Staff** ($10.00)

◯ **Bronze** ($20.00)

◯ **Silver** ($30.00)

◯ **Gold** ($50.00)

◯ **Platinum** ($100.00 or more)

◯ **Lifetime** ($250.00 or more)

Please make your check payable to "Friends of the Library Council" and send to:
Goleman Library
San Joaquin Delta College
5151 Pacific Avenue
Stockton, CA 95207