



Book Club of Detroit Membership Application

Dear friend,

Thank you for your interest in the Book Club of Detroit. Your payment will give you a membership that will expire on December 31, 2018. Please mail this form and a check payable to Book Club of Detroit to:

Book Club of Detroit
P.O. Box 20377
Ferndale, MI 48220-0377

Thank you for your support.

Sincerely,

The Book Club of Detroit Board of Directors

Name(s) _____

Street _____

City _____ State _____ ZIP Code _____

Telephone Number _____

E-mail Address _____

Membership dues are for the calendar year and are not pro-ratable. Please make a selection:

_____ Single Membership - \$35 _____ Family Membership - \$50

_____ Sustaining Membership - \$100

_____ Single Lifetime Membership - \$350 _____ Family Lifetime Membership - \$500

I/we prefer to receive the FABS newsletter via _____ e-mail _____ U.S. Mail

Are you willing to volunteer? Check your preference:

_____ Program Planning _____ Membership Recruitment _____ Board of Directors