

**THE ELIZABETH KELLY LIBRARY FOUNDATION INC.  
APPLICATION FOR MEMBERSHIP**

**ADDRESS:**

**E-MAIL: EKELLYLIBRARYFOUNDATION@GMAIL.COM**

Become a member of the Foundation and support literacy and learning.

Date: \_\_\_\_\_

Name:

\_\_\_\_\_

Contact information:

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Comments:

Please briefly describe why you are interested in being a member of the Foundation.