

HERE'S HOW YOU JOIN!

Simply complete this form and mail or fax back to:

Nonprofit Center

2301 Kell Blvd., Ste. 218

Wichita Falls, TX 76308

940 322-4961 Fax 940 322-4962

adminassist@nonprofitcenterwf.org

www.nonprofitcenterwf.org

_____ **\$20.00 Student**
_____ **\$35.00 Individual**
_____ **\$75.00 Nonprofit Organization**
_____ **\$125.00 Business**

Name: _____

Title: _____

Organization: _____

Address: _____

City: _____ State _____ Zip _____

Phone: _____ Fax _____

Email _____

I/we understand:

- I am responsible for items borrowed from the library.
- I agree to return items in a timely manner.
- I may lose my check out privileges if I fail to return items within the time allotted.
- I will be responsible for replacement costs of any item(s) I fail to return.

Executive Director _____

or

(Signature)

Board President _____

(Signature)

Individual Member _____

(Signature)

Date _____