

The Friends of



BOATWRIGHT MEMORIAL LIBRARY

UNIVERSITY OF RICHMOND, VIRGINIA * 23173

<http://library.richmond.edu/about/friends>

MEMBERSHIP LEVEL

(PLEASE CHECK ONE)

- | | |
|--|--------|
| <input type="checkbox"/> LIFE MEMBERSHIP | \$1000 |
| <input type="checkbox"/> FAMILY MEMBERSHIP | \$50 |
| <input type="checkbox"/> INDIVIDUAL MEMBERSHIP | \$35 |

PLEASE COMPLETE THE FOLLOWING:

ADDRESS INFORMATION

MY ADDRESS:

- PLEASE USE MY CURRENT ADDRESS ON FILE
 SEE NEW ADDRESS BELOW

FIRST NAME _____ LAST NAME _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

E-MAIL _____

**FAMILY MEMBERSHIPS- PLEASE LIST ADDITIONAL FAMILY MEMBER ON MEMBERSHIP:

FIRST NAME _____ LAST
NAME _____

PLEASE RETURN FORM AND MEMBERSHIP
PAYMENT TO:

Boatwright Memorial Library
261 Richmond Way
University Of Richmond, Va 23173

PAYMENTS BY MAIL SHOULD ONLY BE BY CHECK OR
MONEY ORDER. PLEASE MAKE CHECK OUT TO
UNIVERSITY OF RICHMOND. PAYMENT WILL TAKE 7-10
BUSINESS DAYS TO PROCESS.

ANY QUESTIONS OR CONCERNS PLEASE CONTACT THE
ADMINISTRATIVE COORDINATOR AT (804)289-8454.

UPDATED 7/1/19