

## Annual Nonresident Library Membership

## PLEASE PRINT ALL INFORMATION

Full Name:			
Mailing Address:			
Phone:			
Town of Residence:			
eMail Address:			
Would you like to rece	ive our twice monthly e-new	vsletter/calendar? Yes_	No

Total Due: \$25.00

Please complete this form and include it with your check or money order payable to Town of Waterbury. You may drop it off at the Town Office next door, or in their drop box outside the Municipal entrance.

Town of Waterbury 28 N. Main Street, Suite 1 Waterbury, VT 05676

Thank you!

For offi	ce use only	
Cash Co	ode: <b>LIBF</b>	
Paid _	<u>/ / .</u>	
by:	( ) Cash ( ) Check	