Tualatin Library Foundation

Select A Shelf

I wish to participate in the Select a Shelf program

Name _____

Address _____

City, Zip, Phone _____

Email _____

I wish to select a shelf for ☐ one year ($120) ☐☐ permanently ($500)
☐ Shelf for a child (0 – 16 years) ($30)

The shelf should be ☐ fiction ☐ nonfiction (you may specify which section _____)
☐ Children's room

I would like the wording to be:

Limit of 30 characters, including spaces. Add another sheet for additional plates

Optional Text : ☐ in honor of ☐ in memory of

Is this a gift? _____ *A Gift card will be sent to you*

PAYMENT METHOD: <u>CHECK ONE</u>

☐ <u>Option 1:</u> Credit card – (Note that the Foundation is charged service fees)

☐ Visa ☐ MasterCard

Card Number _____ Exp. Date _____

Name on card (print) _____

Signature _____ Date _____

☐ <u>Option 2:</u> Check (enclosed) made out to Tualatin Library Foundation

Thank you for your support. Mail this form to **Tualatin Library Foundation, 18878 SW Martinazzi, Tualatin, OR 97062** or take it to the **New Accounts Desk** at the library.

All donors will be honored in the Foundation's Annual Report, and will be listed on our website. Gifts of $1000 and above will be prominently displayed in the library. The Foundation is a state recognized 501 (c) (3) nonprofit organization, tax number 90-0399361. All donations are tax deductible.