Friends of the NIU Libraries

Apply for Membership

Please fill it out the form and mail it to the following address:

Friends of NIU Libraries
University Libraries
Northern Illinois University
DeKalb, IL 60115

Form of Address:  □ Dr.    □ Miss    □ Mr.    □ Mrs.    □ Ms.

Last Name:

First Name:

Email:

Address:

City, State ZIP:

Affiliation:
   □ Alumni
   □ Community Member
   □ Faculty/Staff
   □ Student
   □ Other:

Membership:
   □ Student ($10, requires copy of ID)
   □ Individual ($35)
   □ Family ($50)
   □ Donor ($100)
   □ Corporate ($500)
   □ Benefactor ($500)
   □ Life ($1000)

(Please make checks payable to Friends of NIU Libraries)
OR
Charge to Visa / MC / Discover

Credit Card Number:
Expiration Date:
Signature:

Thank You!