Leominster Public Library Donation Form

A donation to the Library helps us to bring our collections to life through lectures, classes, programs, events, and more.

Date:	
Name:	
Address:	
City:	State: Zip Code:
Phone N	umber:
	I would like my donation to support the following:
At Library	y's Discretion:
	The Library can decide where funding is most needed.
Communit	y Engagement:
	Adult Programs: speakers, civic discussions, classes, presenters
	Technology: Mobile Hot Spots, e-readers, computers, loanable technology
	Outreach Services: travelling collections, and purchase supplies for mobile Library services
	Teen Programs: supplement teen programming
	Children's Programs: STEAM and STEM programming, presenters and performers
Bookplate Program:	
	All donations up to \$30 will go toward supplementing our Collection.
Friends of	the Leominster Library:
	Donations fund programs for all ages, the museum pass program, and special projects
Amount: \$	
You will receive a letter from the Library acknowledging your donation. If there are others you would like us to notify, please list their names and addresses below:	
If your donation is given in memory of someone, please list the name here:	

Please make checks payable to:

Leominster Public Library 30 West St. Leominster, MA, 01453 Attn: Assistant Director