



I would like to renew my membership in the William L. Clements Library Associates.

Please indicate the amount of your renewal:

<i>\$5 (student)</i>	<i>\$500</i>
<i>\$50</i>	<i>\$1,000</i>
<i>\$75</i>	<i>\$5,000</i>
<i>\$100</i>	<i>Other \$ _____</i>
<i>\$250</i>	

Name _____

Address _____

Phone _____

Email _____

*Please make checks payable to **William L. Clements Library.***

For credit card charge, please complete the following:

M/C Visa Name on Card _____

Credit Card Number _____

Expiration Date _____

Signature _____

Please return this form to:
William L. Clements Library
909 South University Ave.
Ann Arbor, MI 48109
Fax: (734) 647-0716
Email: abhelber@umich.edu

Thank you for your continuing and generous support.

To give online please visit: <https://leadersandbest.umich.edu/find/#/lib/clements>