

Library Lover sign up form

This form can be filled out and submitted online, or mailed to the address on the bottom of form

Name _____

Address _____

City _____

Zip _____

Email address _____

Phone number (optional) _____

- This form authorizes us to draw a specified amount from your checking acct. to be deposited in the ICLFF checking acct. at Citizens Bank in Batesville.

If you have further questions about security and privacy, please contact 870-307-7856, and we will answer your questions.

Account Holders name _____

Bank Name _____

Account number _____

Routing Number _____ (this number is located on the lefthand corner of your check)

The address for mailing is:

ICLFF
267 E. Main
Batesville, Arkansas 72501

Email: iclffinc@gmail.com