
EDEN FOUNDATION INC.

Paynesville, Parker Point

Monrovia, Liberia

www.edenfoundationproject.org/library

Library Application

Please fill out all the necessary information.

PERSONAL INFORMATION:

Name: _____

Address: _____

Today date: _____

Donation \$ _____

EDEN LIBRARY STAFF ONLY:

Name of Staff: _____

Today's Date: _____

Donation Paid: _____

Staff Signature: _____

On behalf of the EDEN FOUNDATION INC., we say welcome to our library.

* Due to the influx of people using the library, there is a time and seating limit.

* This registration is valid for six months only.

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