

Dear Friend,

Please complete the form below to help us process your application.

Thanks,
LIFE Literature

Date: _____

Name of church, organization, or mission:

Name of Pastor, his telephone number, and his identification number:

Documents for registration:

Two references from church and their telephone number:

Address of the church:

Department: _____ **Zone:** _____ **Commune:** _____

Person Authorized to get books, his telephone number, and his identification number.

What are you planning to do with the books? (Sunday school, projects, Seminars, etc)

When do you plan to do this?

Pastor's Signature:

Signature of Authorized Person
