Inquiry & Contact form
Adult Literacy Program
West Milford Lions Club & West Milford Township Library

Instructions: Please complete this form if you are interested in learning more about our Adult Literacy Program. The completed form should be returned to the Reference Desk at the West Milford Library.*

First name: _______________ Last name: __________________________

Home Address:
   Street: _______________________________________________________
   City: ______________________ Zip code: _______________

Home or cell phone: __________________________

Native country: __________________________

Language(s) spoken: __________________________

English speaking contact: Name: __________________________
   Telephone: __________________________

* The completed form can be either dropped off at or mailed to the West Milford Library (Attention: Reference Dept.) at 1470 Union Valley Road; West Milford, N.J. 07480.

Please note that a member of the West Milford Lions Club will contact you within one (1) week after receiving your completed form.

Date received by Reference Dept. __________