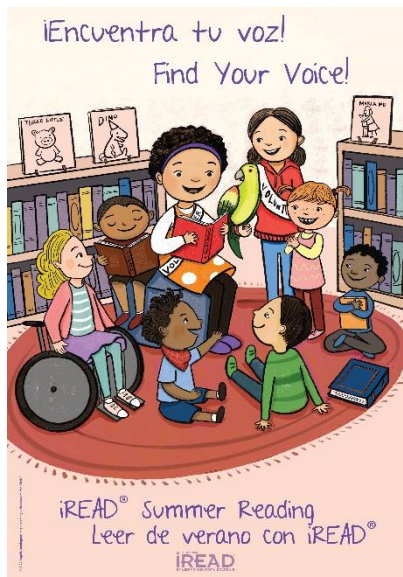


2023 Summer Reading Program Registration Form



Name: _____

Address: _____

Phone: _____

Parent Email _____

Age: ____ **Grade(equivalent) going into:** _____

I give permission for the Summer Reading Program Directors to photograph my child for the purpose of promoting the summer reading program.

YES _____ or NO _____

Parental Signature (Required): _____

For library use only: Programs attended: 1 2 3 4 5 6 7 8 9 10 11 12

2023 Summer Reading Program Registration Form



Name: _____

Address: _____

Phone: _____

Parent Email _____

Age: ____ **Grade(equivalent) going into:** _____

I give permission for the Summer Reading Program Directors to photograph my child for the purpose of promoting the summer reading program.

YES _____ or NO _____

Parental Signature (Required): _____

For library use only: Programs attended: 1 2 3 4 5 6 7 8 9 10 11 12