

# 2022 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):** \_\_\_\_\_

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

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