



Summer Reading 2024 Registration

June 3rd - July 26th

CHILD'S NAME: _____ **GRADE:** _____

PARENT/GUARDIAN: _____

TELEPHONE WHERE PARENT/GUARDIAN CAN BE REACHED DURING THE PROGRAM:

_____ **E-mail:** _____

AUTHORIZED PERSON(S) TO PICK UP CHILD:

Which program is your child joining? Please circle one you may come to any of them the ages are just suggestions.

Story Time for Littles (geared toward ages 0-2 years) Mondays at 10:30-11:15 am

Story Time for Bigs (geared toward ages 3-5 years with a craft) Tuesdays at 10-11am

Story Time for Adventurers (geared toward elementary and older with activities & crafts) Tuesdays at 1-2:30pm

Is your child to walk home after the program? Yes / No

May your child's picture be used for the public library promotions (including social media)? Yes / No

Does your child have any food allergies or special needs we should be aware of? Yes / No

If yes, please list _____

If your child does not have their own library card, you may fill out a library card form for your child and receive a card.

OR You may initial below to indicate you wish your child's SUMMER READING books to be check out under your library account. **Account name** _____ **Initial** _____

PARENT/GUARDIAN

SIGNATURE _____

DATE _____