

Registration

2023 Summer Library Program: *All Together Now!*

Reader's name: _____ Age: _____

Address: _____

Parent phone or email: _____

School: _____ Grade in September: _____

Circle one: independent reader family reader

Completed program: Yes No

Reading Contract

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I, _____, agree to read _____ books, minutes, or pages (circle one) this summer as part of the 2023 summer library program.

Signature of reader: _____ Date: _____

Signature of librarian: _____

