Children's Summer Reading Program Entry Card - 2024 Children's Summer Reading Program Entry Card - 2024 Print neatly as illegible cards will be disqualified. Print neatly as illegible cards will be disqualified. Name of Child: ______ Age: _____ Name of Child: ______ Age: _____ Parent/Guardian: ______Phone: (____) _____ Parent/Guardian: ______Phone: (____) _____ E-mail: _____ School: _____ E-mail: ______ School: _____ Non-Passive Programs attended: Non-Passive Programs attended: _____ Number of hours read/read to/listened to: ______ Number of hours read/read to/listened to: ADVENTURE BEGINS LIBRARY, Week # 1 2 3 4 5 6 7 8 ADVENTURE BEGINS LIBRARY, Week # 1 2 3 4 5 6 7 8 Children's Summer Reading Program Entry Card - 2024 Print neatly as illegible cards will be disqualified.

| Name of Child: | Age: |
|--------------------------------|--------------|
| Parent/Guardian: | Phone: () |
| E-mail: | School: |
| Non-Passive Programs attended: | |
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| Number of hours read/read to/ | listened to: |

| Print neatly a | illegible cards will be disqualified. |
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| Name of Child: | Age: |
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| Children's Summer Reading Program Entry Card - 2024 Print neatly as illegible cards will be disqualified. | | | | |
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| E-mail: | School: | | | |
| Non-Passive Programs attended: | | | | |
| Number of hours read/read to/listened to: | | | | |
| ADVENTURE BEGINS LIBRARY. | Staff Use Only: Week # 1 2 3 4 5 6 7 8 | | | |

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| Name of Child: | Age: | | | |
| Parent/Guardian: | Phone: () | | | |
| E-mail: | School: | | | |
| Non-Passive Programs attended: | | | | |
| Number of hours read/read to/listened to: ADVENTURE REGINS LIBRARY Week # 1 Staff Use Only: 2 3 4 5 6 7 8 | | | | |