

# A UNIVERSE OF STORIES

## 2019 Summer Library Program Teen Registration and Contract

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Grade next school year: \_\_\_\_\_

I have read 100 pages

When you have completed this form bring it to the GPL between June 3-14 and trade it in for a tracking sheet. You will be officially registered for Garrison's Summer Library Program.

I have set a goal of reading \_\_\_\_\_ pages from age appropriate books during SLP. (minimum is 900)

\* Books must be checked out of GP Library

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

(per 100)



Eat.



Sleep.



Read.