1,000 Books Before Kindergarten

@Walworth-Seely Public Library

2017 Registration Form

Child's Name: _____

Birthdate: _____

I will start Kindergarten in the year 20_____

Parent/Caregiver information:

Name _____

Address _____ **City/State/Zip** _____

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~ Permission to Participate ~

By signing below, I give my child permission to participate in the 1,000 Books Before Kindergarten Program at the Walworth-Seely Public Library. I understand my child will be reading books (or be read to) in order to reach a goal of 1,000 books before they enter kindergarten.

I DO / I DO NOT give Walworth-Seely Public Library, its representatives and employees the right to take photographs of me, my child and my property in connection with the 1,000 Books Before Kindergarten Program. I authorize Walworth-Seely Public Library, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that Walworth-Seely Public Library may use such photographs of me and/or my child with or without my name for any lawful purpose, including for example such purposes as publicity, illustration, advertising and Web content.

I have read and understand the above:

_____ _____

Parent/Guardian Signature Date