Summer Reading Challenge
Registration

First Name: ______________________________
Last Name: ______________________________
Library Card #: __________________________
Phone Number: __________________________
Email: _________________________________

Age group (check one):
Ages 0-4  □  Ages 5-12  □
Ages 13-17  □  Ages 18+  □

**For Youth Registrations**
Parent/Guardian: _________________________

Staff use only  →  Sign-up date: _______  Sign-up entered: _______

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<table>
<thead>
<tr>
<th>Category</th>
<th>Goal 1</th>
<th>Goal 2</th>
<th>Goal 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Growing Readers</td>
<td>50 books</td>
<td>100 books</td>
<td>25 hours</td>
</tr>
<tr>
<td>(ages 0-4)</td>
<td>5 hours</td>
<td>10 hours</td>
<td>Shirt size:</td>
</tr>
<tr>
<td>Kids/Teens</td>
<td>10 books</td>
<td>100 books</td>
<td>Shirt size:</td>
</tr>
<tr>
<td>(ages 5-17)</td>
<td>5 hours</td>
<td>10 hours</td>
<td></td>
</tr>
<tr>
<td>Adults</td>
<td>10 books</td>
<td>100 books</td>
<td>Shirt size:</td>
</tr>
<tr>
<td>(ages 18+)</td>
<td>5 hours</td>
<td>10 hours</td>
<td></td>
</tr>
</tbody>
</table>

**Prize checklist** - staff use only