



Parents please complete one form for each child to participate and return to the library.

1<sup>st</sup>-3<sup>rd</sup> Grade

\_\_\_\_\_ July 20<sup>th</sup> or \_\_\_\_\_ July 27<sup>th</sup>

4<sup>th</sup> -5<sup>th</sup> Grade

\_\_\_\_\_ August 3<sup>rd</sup> or \_\_\_\_\_ August 10<sup>th</sup>

Parent's Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Child's Age: \_\_\_\_\_

Parent's Contact #: \_\_\_\_\_

\*Parent's Signature: \_\_\_\_\_

The library may take photos during library activities, parental consent is needed for posting on our website and social media platforms. Please initial your choice below.

\_\_\_\_\_ YES I do give permission for my child to be photographed.

\_\_\_\_\_ NO I do not give permission for my child to be photographed.