Wilmington Library Summer Reading Registration

Name of Child: _____

Name of Parent/Guardian: _____

Address: _____

_____

Parent's Email: _____

Phone: _____

Age: _____ Grade in September: _____

School: _____

☐ Family Reader (Not yet an independent reader)
☐ Independent Reader
☐ Middle School

- Keep track of minutes read with the tracking sheet provided (more available on request).
- For every 100 minutes read, readers earn a prize.
- The top three readers earn Amazon gift cards.

Return the form to the library or by email: library@wilmingtoncooperlibrary.net

Total minutes read: _____

Library use only