Summer Reading Registration

June 24th-August 5th

You can return this form in the Library's DVD drop box or e-mail to miltonsummerreading@gmail.com.

You can get your all your Weekly Quests, Quest Log, Calendar, and Weekly Agendas online or at the Library's Curbside Rest Stop

*Participant: _____

*Parent/Guardian (for patrons under 16)

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*Which Summer Reading Program are you registering for:

()2 yrs old to entering Kindergarten in the fall

()Entering 1st-4th Grade in the Fall

()Entering 5th-8th Grade in the Fall

()Teens and Adults

*e-mail: ______

Phone Number (in case you win a prize)______

*Do you have a library card: () Yes ()No

*Do you have internet: ()Yes ()No

*What "town" do you live in? ______
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*required

Milton Public Library

541 Broadway

Milton, PA 17847