

# Hudsonville Community Fair

## Read and Win - FORM



Book Name	Time (minutes)	Book Name	Time (minutes)
Total Time Read (Minutes)		Total Time Read (Minutes)	

Book Name	Time (minutes)	Book Name	Time (minutes)
Total Time Read (Minutes)		Total Time Read (Minutes)	

Book Name	Time (minutes)	Book Name	Time (minutes)
Total Time Read (Minutes)		Total Time Read (Minutes)	

Parents' Signature \_\_\_\_\_ Date: \_\_\_\_\_

Participant's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address \_\_\_\_\_

Phone # : \_\_\_\_\_

Where did you hear about this program? \_\_\_\_\_

\*If picture books are read to a participant, list them as a PICTURE BOOK as book name.