



1,000 BOOKS BEFORE KINDERGARTEN APPLICATION

Name of Parent or guardian _____

Address _____

City _____ State _____ Zip _____

E-mail _____ (to inform you of any special programs)

Child Participants:

1. Name of Child _____ Age _____

Year entering Kindergarten _____

2.. Name of Child _____ Age _____

Year entering Kindergarten _____

3. Name of Child _____ Age _____

Year entering Kindergarten _____

*I agree to take the challenge to read 1,000 books before my child goes to Kindergarten. By doing so, I will be exposing my child to a rich world of vocabulary and literature which will prepare him/her to be ready to read.

Signature

Talking Singing Reading Writing Playing Talking Singing Reading Writing Playing Talking Singing Reading