

Family Agreement and Registration Form

Glen Rock Public Library Children's Room

4:00 – 4:30 pm

Eight (8) Wednesdays including:

2/1, 2/8, 2/15, 2/22, 2/29, 3/7, 3/14, 3/21

Thank you for taking part in the Book Buddy Program!

- Your child will meet with a reading buddy for eight (8) 30 minute reading sessions.
- Our reading volunteers are in the 8th grade or above.
- The majority of our volunteers are in the National and Junior National Honor Societies.
- We will make every effort to have your child paired with the same buddy for all eight (8) sessions.
- Your child may bring a personal book or may choose one from the children's section of the library.
- Please complete the Participant Agreement by **January... 19th** and return it to the children's room desk. Agreements may also be mailed directly to:

Kerry Spichiger
26 Rodney Street
Glen Rock, NJ 07452

- You may contact Kerry Spichiger @ (201) 956-4896 or @ SpichigerK@gmail.com with any questions.

Family Agreement

1. I will bring a book from home or choose a book at the library to read with my buddy.
2. I will behave appropriately while reading with my book buddy.
3. I will not leave the children's room until my parent / guardian arrives.
4. I will tell the librarian if I am unhappy or uncomfortable in any way.
5. I will contact Kerry Spichiger @ (201) 956-4896 or SpichigerK@gmail.com if I am unable to attend a session.
6. I will have fun!

I have reviewed this agreement and I agree to abide by these rules.

Child's Signature: _____

Parent / Caregiver Signature: _____

Date: _____

Childs age: _____

Childs grade: _____

Home Phone: _____

Email Address: _____