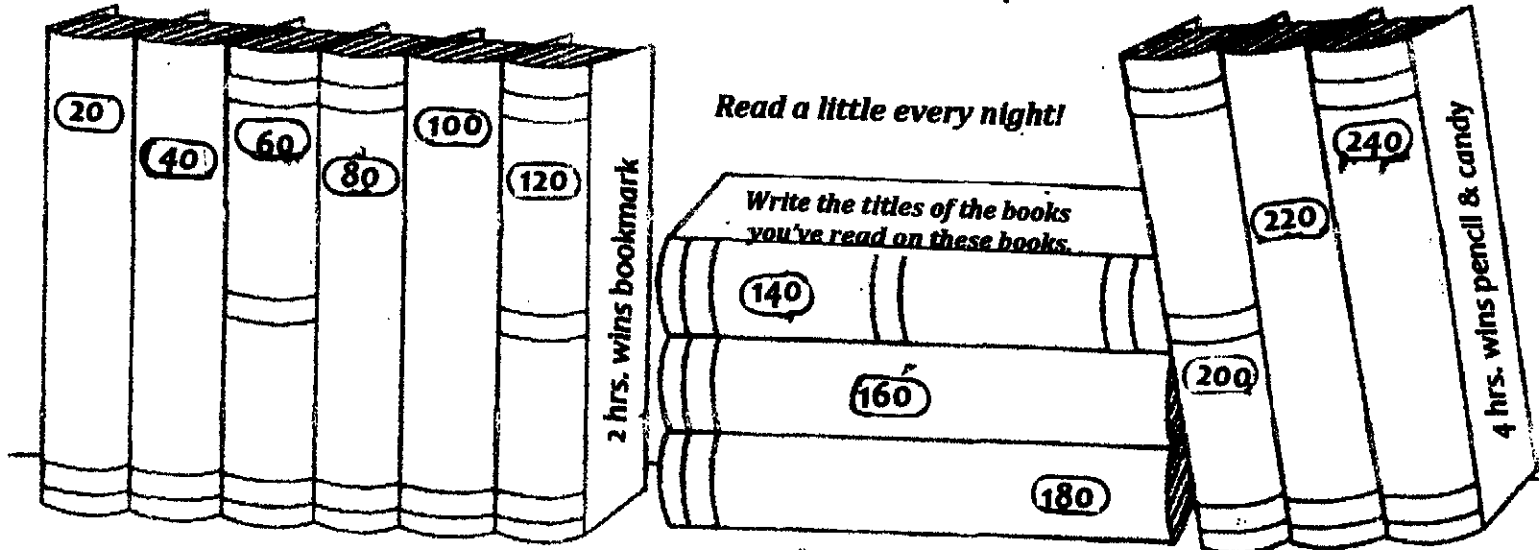


# Make Time for Reading!

Read your way to fun, adventure and PRIZES! The more you read, the more you win!

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Each time you read 20 minutes, fill in a shape below.



Make sure your parents sign this form and return it to the library or to your teacher by the last day of the month!

