Sidney Public Library

Summer Reading Program



## **Find Your Voice**

School will soon be out for the summer, which means there'll be plenty of time for other activities. Kids K-6 are invited to join us for fun at the Sidney Public Library. We've lined up fascinating presentations, crafts, and storytimes that reflect the theme Find Your Voice.

-----Registration is required!-----

Please turn in your registrations by May 23rd so that we can plan on and purchase resources for our sessions.

Completed registrations forms may be returned to the Sidney Elementary office or to the Sidney Public Library.

The Summer Library Program will be divided between two age groups: Kids who will be in Kindergarten through 2<sup>nd</sup> grade and kids who will be in 3<sup>rd</sup> through 6<sup>th</sup> grade.

<u>Kids who will be in 3-6</u> Tuesdays 10:00am to 11:30pm May 30, Jun 6, 13, 20, 27 Kids who will be in K-2 Fridays 10:00am to 11:30am Jun 2, 9, 16, 23, 30





## **Find Your Voice!**

Sidney Public Library

Summer Reading Program Registration. Please complete: 1) This form for each child attending the Summer

Reading Program.

2) (Optional) A photo release form for your family if it is okay to publish photos of your child.

3) (Optional) A new member application for children that do not have a library card.

Child's Name\_

Age

Grade in September 2023\_\_\_\_\_

Disabilities, Allergies, or Special Needs:

Parent/Guardian Name\_\_\_\_\_

Phone number \_\_\_\_\_

E-Mail Address (required)\_\_\_\_\_

We will be using e-mail to send you any updates or information you need regarding the summer library program.

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## CALL FOR VOLUNTEERS!

We are always looking for eager volunteers to help with our programming. If you can help us this summer, please complete this section.

If you are interested in provided cookies/snacks one or more days which date(s) can

you provide them?\_\_\_\_\_

Would you like to assist during the summer reading sessions and if so, at which

session(s) can you help?\_\_\_\_\_



## **New Member Application**

Last Name		First Name		
Street Address:				
P.O. Box:				
City:		_State:	Zip:	
Home phone:		Cell phone:		
Primary (circle 1): Hor	me	Cell		
E-Mail Address				
Birth date (MM/DD/YYYY):				
Overdue notice:	e-mail	text		
Reserved book available:	e-mail	text		
Due-date notice:	e-mail	text		
(3 days before due date)				
Check-out receipt:	print	e-mail	none	
Newsletter Opt-in: Y N				

I agree to obey all the rules and regulations of the Sidney Public Library, pay all charged penalties, and give immediate notice of any change of address or phone number.

\_\_\_\_\_Today's date:\_\_\_\_\_\_ (Signature of member. Parent's signature if child is under age 12)

Parents name printed\_\_\_\_\_\_



Photo Release Form

I, the undersigned, hereby grant permission to the Sidney Public Library to use photographs taken of my child/children during Summer Library Programs, summer 2023, to publicize and promote the Library and its programs. I understand that photos may appear on the Sidney Public Library web site, Facebook page, or in other official library publications and displays without further consideration or compensation. I also acknowledge the library's right to crop or treat the photograph at its discretion.

Full name(s) of child/children		
Today's date		
Parent/Guardian name		
Phone	E-mail	
Parent/Guardian signature		