



**Carrollton Public Library 2019 Summer Reading Program**  
**UNIVERSE OF STORIES Registration**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Parent/Caregiver Email: \_\_\_\_\_

Age: \_\_\_\_\_ School: \_\_\_\_\_

Grade in August: \_\_\_\_\_ Circle One: Independent Reader / Family Reader

READING GOAL: \_\_\_\_\_ Hours per week or # of Books

**Permission to Videotape and/or Photograph**

I am the parent, caregiver or legal guardian of \_\_\_\_\_ (child's name).  
I understand the Carrollton Public Library may photograph or videotape the events or activity in which I am (or my child is) participating. I give my permission for the Carrollton Public Library to use photographs or videotape of me (or my child) for the purpose of promoting the Carrollton Public Library and its services/programs. I give my permission with the following understanding: No compensation of any kind will be paid to me (or my child) at this time or in the future for the use of my (or my child's) likeness.

*Permission is not required to take part in library events.*

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

**Permission for participating in an event  
sponsored by the Carrollton Public Library**

Permission slip for: \_\_\_\_\_ (Child's name)

I give permission for above named child/individual/person to participate in the Carrollton Public Library's activities during the following events/dates.

- UNIVERSE OF STORIES Booth, June 27, 2019 the Carroll County Fair grounds, Walnut Hills, East of Carrollton, MO
- STARRY NIGHT event, June 10 (rain date June 11) and July 8 (rain date July 9), 2019 at 4-H Building, Walnut Hills, East of Carrollton, MO

Parent or Guardian Signature: \_\_\_\_\_