



**Contact Information**

Phone Number

Email Address

Your Branch

How many participants are you registering?

**Have you registered for this program before?**

Yes

No

How did you learn of the program? (Select all that apply)

Library/Librarian

Library website

School

Daycare

Friend

Radio/TV/Newspaper

Another way

**Participant Details**

Name

Birthdate

Gender

Group

Member #

Create a unique Reading Club username for this participant. This username is also needed for log in.

Username

