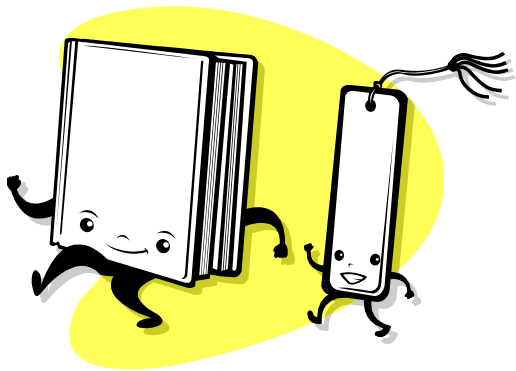


A summer LITERACY PROGRAM for young readers

Book Buddies

For children entering **GRADES 1-3**

Buddies will meet once a week for 6 weeks. During each 45-minute session, they will read aloud together, talk about the stories, and share a fun activity. Your child will be matched with a volunteer who is entering grade 7 through grade 12.



The program runs from June 13 to July 27 on Tuesdays, Wednesdays, and Thursdays.

(No sessions on July 4, 5 or 6.)

**Tuesdays: 6:45 p.m. to 7:30 p.m.,
Wednesdays: 4:45 p.m. to 5:30 p.m. OR
Thursdays: 6:45 p.m. to 7:30 p.m.**

Children participating in the program must be able to attend at least 5 of the 6 weeks.

Due to the popularity of the program, this application must be returned within 3 days of registration in order to guarantee your child's space.

This program is designed to create a relaxed environment where a child feels comfortable reading out loud and enjoys time with their Big Buddy. A child who enjoys reading will:

- Become a stronger reader
- Read more books
- Develop a larger vocabulary
- Improve spelling
- Grow intellectually
- Feel more connected to others

Youth Services Department
Deerfield Public Library
920 Waukegan Road
Deerfield, IL 60015
(847) 580-8962
www.deerfieldlibrary.org



Date returned: _____

Staff Initials: _____

Book Buddies

PROGRAM REGISTRATION PACKET Program for children entering Grades 1 – 3 Deerfield Public Library – Youth Services Department

To register your child for this program, please complete this entire packet and **return it to the Youth Services Department within 3 days of registration**. If you have any questions, please call the Youth Services Department at 847-580-8962.

Child's First Name: _____ Last Name: _____

Male Female Age: _____ Grade next fall: _____

Parent/Caregiver Name and email: _____

Street Address: _____

City: _____ Phone Number: (____) _____

PLEASE ANSWER THE FOLLOWING QUESTIONS ABOUT YOUR CHILD.

Does your child know how to read? Yes No Reads with help

My child's favorite books/authors include: _____

My child's hobbies/interests include: _____

What type of books is your child currently reading?

Picture Books Early Readers Easy Chapter Books Chapter Books

Is there anything you would like to tell us about your child: his/her learning style, his/her personality, etc.?

My child will be available to attend at least five of the six weeks of the program:

Yes

No

If you know of any one date when your child cannot attend his or her scheduled session, please list that date below.

Date I know my child cannot attend: _____

Volunteers will range in age from 12 to 17. If there is any reason your child should be paired with a female or male specifically, please let us know here. If you leave this area blank, we will match your child solely on our own discretion. ***We can't guarantee that we will be able to accommodate every request, but we will try whenever possible.***

On the day of a session, if your child is sick, please contact the Youth Services Department (847-580-8962) as soon as possible to allow us time to contact your child's Big Buddy.

I understand that I must remain in the Library during the 45-minute session each week, and, if possible, in an area *other* than the Youth Services Department.

Parent Signature

I can be reached at this cell phone number: _____

In case of emergency, please call _____
at _____.