



**\*Please return this form to Mrs. Jones  
in the library, by October 13, 2023**

I give my permission for the following student to participate in the 2023-24 Amazing Reading Challenge:

\_\_\_\_\_  
Student name

\_\_\_\_\_  
Teacher

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

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
Parent/Guardian email

**By agreeing that my child can participate in the Amazing Reading Challenge, I understand I will be responsible to arrange transportation for my child to attend the after-school semi-final District Challenge (between late February and the first week in March, 2024), and for the Final Challenge (end of March 2024), if necessary.**

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Date

**I understand that teams will be chosen by the librarian and teachers. By choosing to participate, I commit to reading at least one book, attending meetings during my lunch recess once per week, and demonstrating good citizenship and teamwork.**

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

**Students** – Please list up to three people you would like to have on your team (include last name and teacher). Final team selections will be made by [librarian].

Name: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

Name: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

Name: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_