

2017 Marshall Bullock Summer Reading Program

Build a Better World

Name: _____

Parent/Guardian's Name: _____

Age (for Children): _____ Card Number: _____ T-Shirt Size: _____

Optional

Photograph & Video Permissions:

I _____ am the parent or legal guardian of _____.

(Adult's Name, please print)

(Child's Name)

I give my child permission to participate in any Library program to which I bring him or her. I understand the James L. Hamner 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 Library to use photographs or videotape of me (or my child) for the purpose of promoting the James L. Hamner Public Library and its services and 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.

Signature: _____ Date: _____

Office Use Only

- Received a 1-hour prize
- Received t-shirt

Child

Teen

Adult