

TD Summer reading club 2017

**Canada's 150<sup>th</sup>**

Registration form

Name (of participant): \_\_\_\_\_

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

French/English (participant's primary language): \_\_\_\_\_

Contact Information: Phone # \_\_\_\_\_

Contact name and relation to child: \_\_\_\_\_

Parent signature: \_\_\_\_\_

Date: \_\_\_\_\_