



Battle of the Books 4th Grade Book Club Sign-up Sheet

Please read and complete the following form. Forms may be turned in to your teacher or to your local NOLS library.

Name: _____

School: _____

Teacher: _____

PLEASE READ CAREFULLY BEFORE SIGNING

By signing this form, I understand that I am responsible for reading three book club books during the school year. I also understand that there will be a monthly book group either online after school or during class time, and that I am responsible for attending these sessions. Students should make a reasonable effort to attend book club meetings.

Photographs and videos are often taken at library programs and events for use in North Olympic Library System promotional materials and on the library website. I acknowledge that I have been informed that book club members may be featured in photographs/videos taken at the book club, and that I understand that those images may be printed or digitally displayed by the library for library promotional purposes.

Applicant's signature Date: _____

Parent/Guardian signature: *By signing Parent/Guardian gives permission for child to participate in the book club.* Date: _____

(Print Parent/Guardian name)

Applications Due by February 1, 2022