

# EPL 2024 SRC Registration Form

Adult name: \_\_\_\_\_

Email for family group: (everyone listed on form will be added to family account with shared email): \_\_\_\_\_

Phone: \_\_\_\_\_

Municipality (Circle or write in):

Emmaus Borough

Macungie Borough

Upper Milford Twp.

Other \_\_\_\_\_

- Name: \_\_\_\_\_
  - Current Age:
  - Grade (in Fall '24):
  - School:
- Name: \_\_\_\_\_
  - Current Age:
  - Grade (in Fall '24):
  - School:
- Name: \_\_\_\_\_
  - Current Age:
  - Grade (in Fall '24):
  - School:
- Name: \_\_\_\_\_
  - Current Age:
  - Grade (in Fall '24):
  - School:

The Library has permission to share my children's names with their school as a Summer Reader: Y / N