

**BOOK AN ADVENTURE TEEN entry form—
Please PRINT CLEARLY:**

NAME (First and last) _____

AGE _____ PHONE _____

EMAIL (optional) _____
(for email updates on Teen programs at the library. All info remains confidential.)

TITLE OF BOOK (or Graphic Novel, AudioBook):

AUTHOR'S NAME:

I give this book a (Circle one):



Drop entry form in the prize box of your choice
In the Teen Area. Winners will be notified by telephone.



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