

I, _____print legal guardian's name here_____, agree that I have read the information on the Madison Public Library's website about after school programs. I give permission for my child, _____print child's name here_____ who is in _____ grade to attend Middle School Book Discussion Group on _____date here_____. I am aware my child must enter through the high school side entrance to the library between 2:45 and 3 pm.

(Legal Guardian Signature)

(Date)

(Contact phone number)



Madison Public Library

(440) 428-2189

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