

# SUMMER CHALLENGE



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## TEEN SUMMER READING PROGRAM (AGES 13-18)

Name: \_\_\_\_\_

Age/Grade: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Title of Book: \_\_\_\_\_

Author: \_\_\_\_\_

Tell us a little about the book: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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