

Summer Read Up Application



Working **Together** to
Improve Early Learning

DATE: _____ AGENCY: _____

CONTACT NAME: _____ TITLE: _____

PHONE: _____ E-MAIL ADDRESS: _____

Event Start date: _____ Event End date: _____ Time of Event: _____

Number of weeks (up to 8): _____

Day of week:

Mondays

Tuesdays

Wednesdays

Thursdays

Fridays

Saturdays

Number of Adults expected: _____ Number of Children expected: _____

Number of books requesting per age per week:

Age	English	Spanish/Bilingual
0-1		
2-3		
4-5		
6-8		

Please tell us what kind of organization you are:

For Profit

Non-Profit

Day Camp

Summer School

Other: _____

Required:

- Activities at Event: Out loud reading, Book giveaway, Fill out report form
- Agencies participating for the **FIRST** time: Attend a training (details to be determined)

We will send an email once your application is approved.

Serving communities in Benton and Franklin Counties and Burbank

If you have any questions, please contact... Vanesa Razo at 509-222-READ (7323) vanesa@read20minutes.com

*Thank you for partnering with us to invest in literacy and early learning.
Your involvement will have a lasting impact on the families and children served by the
Children's Reading Foundation of the Mid-Columbia.*