



**River Forest
Public Library**
Your journey starts here.

Book Buddies Parent or Guardian Agreement 2026

Participants Information:

Participant Name: _____

Street Address: _____
(River Forest residents only)

What grade is the participant entering this fall? _____ What is their birthday? ____-____-_____

Parent or Guardian Information:

Parent or Guardian Name: _____

Street Address: _____
(River Forest residents only)

Home Phone/Cell Phone: _____

Email: _____

What is Book Buddies?

Book Buddies is a new program offered in the summer for children entering grades 1-3 in the fall. The Book Buddies Program helps to promote reading and literacy skills, as well as confidence for both participants and their buddy. Participants will be matched with a Book Buddy (middle school and teen volunteers) and meet for one hour per week for four weeks. Sessions begin and end together as a group with a story, game, or activity. There will be 30-minute break-out session with a Book Buddy where buddies will assist their participants with book selection, reading together, and talking about books. **This is not a tutoring program.**

This program occurs on specific dates and times, and we ask that participants are available for all their meetings in their selected timeslot. The Book Buddies program only meets on Tuesdays and Wednesdays from **July 7th – July 29th** for one hour. Sessions are as follows:

Session 1	Session 2
Tuesdays 3:30pm – 4:30pm	Wednesdays 5:30pm – 6:30pm
July 7	July 8
July 14	July 15
July 21	July 22
July 28	July 29

Sample Session Schedule:

3:30-3:45pm: Buddies arrive and begin with activity/sharing a story

3:45pm-4:15pm: Breakout sessions with buddies

4:15-4:30pm: Meet all together for final game/activity with buddies

Please select which session you are available for:

Session 1:	Session 2:
Tuesdays 3:30pm – 4:30pm	Wednesdays 5:30pm – 6:30pm

Will your child require any accommodations?

By signing this agreement, I acknowledge the dates and times that I've selected for my child to attend this program:

Parent or Guardian Signature: _____ Date: _____