

Educator's name:	
Educator's email address:	
Educator's mailing address (where book and information packet should be delivered):	
Phone numbers:	
Name of school and district:	
Grade level participating:	Number of students involved:
How did you hear about the ATPE Book of the Month Club Guest Reader Program?	
<p>Preferred month (all materials are due 5 weeks in advance): _____</p> <p>and book title (select from the 2011-12 TLA list for your grade level):</p> <p>_____</p>	

I _____ promise to read the ATPE Book of the Month Club selection with my class and submit 10 discussion questions on or before the established due date to ATPE Professional Development Coordinator Kris Woodcock. I understand that in order for ATPE to post a picture of my class on the Internet, I need to submit a signed release form from all of the parents or legal guardians of students who are pictured. *I understand that this program requires my commitment to complete the questions for my assigned month; therefore, if I am unable to complete the program, another class will lose out on the opportunity.*

Signature _____ Date _____