

READING CARD

Name: \_\_\_\_\_ HR: \_\_\_\_\_ BC: \_\_\_\_\_  
 Month: \_\_\_\_\_ Goal: \_\_\_\_\_ Due: \_\_\_\_\_

OBJECTIVE: To get students reading on a daily basis – a minimum of 20 minutes per day. All reading materials are acceptable: books, magazines, newspapers, etc...

REWARD: Students who meet their monthly goal will receive a reward to be as determined by the teacher.

NOTE TO PARENTS: Please sign your name only ONCE PER DAY no matter how long your child reads. Please sign the lines in numerical order; the number on each line is NOT the date. Thank you for supporting your child's reading development.



SIGNATURE	DATE	MIN	SIGNATURE	DATE	MIN
			17		
			18		
			19		
		<input type="checkbox"/>	20		
			21		
			22		
			23		
			24		
			25		
<input type="checkbox"/>			26		
			27		
			28		
			29		
		<input type="checkbox"/>	30		
			31		

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