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Tween Book Club Membership Form

Tween's Name: _____ Age: _____

School: _____ Grade: _____

Home Address: _____

Phone: _____ Parent's Email: _____

Special Concerns / Needs: _____

Parent / Guardian Name: _____

Parent / Guardian Signature: _____

Membership Dues: \$20.00 \$28.00 (with book)

Cash Enclosed: _____ Check Number: _____

Credit Card Number: _____ CVV: _____ Exp. Date: _____

Please return membership form and dues to address above to secure your membership in the Tween Book Club!

