

**2017-2018 Bandit’s Book Challenge**

Bandit’s Book Challenge Record Form

*Once your child has read 10 books, please return to*

*your child’s teacher by April 16,2018. Thank you.*

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 *Student’s Name\* - Please Print School Name*

***\*Name will be printed on certificate as it appears above.***

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Student’s Address- Please Print complete address

 Title of Book Title of Book

1. 6.
2. 7.
3. 8.
4. 9.
5. 10.

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Signature of Parent or Guardian