

Dolly Parton's Imagination Library Official Registration Form (one form per child required)

Preschool Child's **FULL** Name _____

Child's Date of Birth ____/____/____ Sex: M F Phone _____

Parent/Guardian's Name _____

Child's Home Address _____
ADDRESS

CITY STATE ZIP CODE

Mailing Address (if different) _____
ADDRESS

CITY STATE ZIP CODE

"This child resides within Menominee County"

SIGNATURE OF PARENT OR GUARDIAN

FOR OFFICIAL USE ONLY: Date Received: _____ Group Code: _____



**Register
your child
today!**

Simply fill out the above form and mail to:
Menominee County
Independent School
District
1201 41st Avenue
Menominee, MI 49858
906-863-5665