

BOOK IT!® Reading Contract

By the Minute

I, _____, agree to read _____
(name) (number)

minutes during the month of:

OCT **NOV** **DEC** **JAN** **FEB** **MAR**

(Circle one)

When I finish a book, I will:

- | | |
|---|--|
| <input type="checkbox"/> Give an oral report | <input type="checkbox"/> Write a summary |
| <input type="checkbox"/> Take a computer test | <input type="checkbox"/> Other _____ |

Student's Signature

Parent



Teacher

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