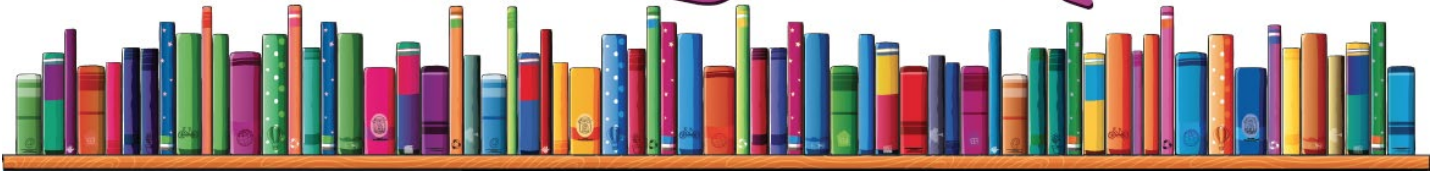


1000 BOOKS



1,000 BBK Registration Form

Child's Name: _____ Today's Date: _____

Address: _____

Child's Birth Date: _____

Parent or Guardian Name: _____

Contact Number (Cell Phone Preferred): _____

Email: _____

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