 **Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade\_\_\_\_\_\_\_\_\_\_\_**

**BES READ-A-THON Minute Recording Sheet**

**Parents please initial**

**each day.**

**Teacher\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* **My goal is to read\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ minutes in 20 days.**

**Start Reading on Sunday, October 1st**

**October 2017**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| SUNDAY | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | SATURDAY |
| 1Minutes Read:Initials: | 2Minutes Read:Initials: | 3Minutes Read:Initials: | 4Minutes Read:Initials: | 5Minutes Read:Initials: | 6Minutes Read:Initials: | 7Minutes Read:Initials: |
| 8Minutes Read:Initials: | 9Minutes Read:Initials: | 10Minutes Read:Initials: | 11Minutes Read:Initials: | 12Minutes Read:Initials: | 13Minutes Read:Initials: | 14Minutes Read:Initials: |
| 15Minutes Read:Initials: | 16Minutes Read:Initials: | 17Minutes Read:Initials: | 18Minutes Read:Initials: | 19Minutes Read:Initials: | 20Minutes Read:Initials: |  |

October 25th: Return your **Minute Recording Sheet, Sponsorship Form**, and **Money Collected** in the Read-A-Thon envelope to school by this date in order to be entered into the prize drawings.

TOTAL MINUTES READ:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PARENT’S SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_