

EXPRESS K PICKUP



First Name _____

Last Name _____

Email address _____

Phone Number _____

Library Card Number _____

Pick Up Date _____ (at least two days in advance)

Have you used this service before? Yes__ No__

If you receive a resource you have already had, please let a staff member know so it can be exchanged.

Please check up to 5 topics you would like to receive resources about:

- Counting objects
- Identifying numbers
- Reciting from A-Z
- Naming letters/letter sounds
- Following directions
- Sharing
- Starting Kindergarten

My child has a special interest in:

My child enjoys these book characters:

- Please check if you **ONLY** want to receive books (no electronic or media resources)

You will receive an email when your 5 resources are on hold at the Youth Services desk. **You will have 3 days to pick up your resources.** Please contact Youth Services if you have any questions. 724-941-9430 Ext. 3160

STAFF _____

DATE _____