



*Widening Westford's World*

# J.V. Fletcher Library Children's Display Case Registration Form

DISPLAY PERIOD: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_

DESCRIPTION OF DISPLAY (*include special requirements*):

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DATE OF SET-UP: \_\_\_\_\_ DATE OF BREAKDOWN: \_\_\_\_\_

LIBRARY CONTACT PERSON: \_\_\_\_\_

STAFF INITIALS: \_\_\_\_\_ DATE: \_\_\_\_\_