

**St. Monica Catholic School
Birthday & Gift Book Program
2006-2007**

Grade: _____ **Teacher:** _____

Purchaser's Name: _____ **Phone #:** _____

Address: _____

Child's/Honorees Name: _____
(As it should appear on the bookplate)

Salutation (i.e., Happy Birthday Sally Love, Mom & Dad): _____

Event: Birthday Date: _____
 First Communion Date: _____
 Confirmation Date: _____
 Christmas
 Other: _____

Please choose one from the following:

Suggested Book List: _____

(Include Title and Author)

Specific Book: _____

(Include Title and Author)

Please choose a book for my child.
They are interested in the following (check any that apply):

<input type="checkbox"/> Fairy tales / folk tales	<input type="checkbox"/> Fantasy
<input type="checkbox"/> Picture Book	<input type="checkbox"/> Poetry
<input type="checkbox"/> Biography	<input type="checkbox"/> Mystery
<input type="checkbox"/> Historical fiction	
<input type="checkbox"/> Science fiction	
<input type="checkbox"/> Non Fiction - Indicate an area of interest (science, space, history, Native Americans, bugs, etc.): _____	
<input type="checkbox"/> Favorite Author or Series _____	

- **Please complete a form for each book donated. Return by March 1, 2007.**
- **Return form(s) to your child's homeroom teacher or Library.**
- **Include \$20.00 for each book. Make checks payable to: St. Monica School.**