

Dolly Parton's IMAGINATION LIBRARY Registration Form (One per child required)

Privacy Statement: This information will NOT be used for any purpose other than the Imagination Library

Please Print

Preschool Child's FULL Name _____

Child's Date of Birth _____ / _____ Sex: M F Phone _____

Parent/Guardian's Name _____

Child's Home Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address (if different) _____

City: _____ State: _____ Zip Code: _____

"The Child is a resident of Buchanan County" Parent/ Guardian Sign Here _____

FOR OFFICE US ONLY: Date Received: _____

Sign up your child today!

Simply fill out the form and mail to:
Friends of the
Buchanan County Public Library
1185 Poe Town Street
Grundy, VA 24614
(276) 935-5721



The Dollywood Foundation
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