



ENJOY THE PLEASURE OF READING

USE THIS CALENDAR TO KEEP TRACK OF YOUR READINGS: WHEN A BOOK IS FINISHED, CHECK IT OFF! YOU CAN ALSO INDICATE THE TITLE OF EACH BOOK!

SEPTEMBER 2024 LITERACY MONTH

| SUN | MON | TUE | WED | THU | FRI | SAT |
|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| 1 TITLE <input type="checkbox"/> | 2 TITLE <input type="checkbox"/> | 3 TITLE <input type="checkbox"/> | 4 TITLE <input type="checkbox"/> | 5 TITLE <input type="checkbox"/> | 6 TITLE <input type="checkbox"/> | 7 TITLE <input type="checkbox"/> |
| 8 TITLE <input type="checkbox"/> | 9 TITLE <input type="checkbox"/> | 10 TITLE <input type="checkbox"/> | 11 TITLE <input type="checkbox"/> | 12 TITLE <input type="checkbox"/> | 13 TITLE <input type="checkbox"/> | 14 TITLE <input type="checkbox"/> |
| 15 TITLE <input type="checkbox"/> | 16 TITLE <input type="checkbox"/> | 17 TITLE <input type="checkbox"/> | 18 TITLE <input type="checkbox"/> | 19 TITLE <input type="checkbox"/> | 20 TITLE <input type="checkbox"/> | 21 TITLE <input type="checkbox"/> |
| 22 TITLE <input type="checkbox"/> | 23 TITLE <input type="checkbox"/> | 24 TITLE <input type="checkbox"/> | 25 TITLE <input type="checkbox"/> | 26 TITLE <input type="checkbox"/> | 27 TITLE <input type="checkbox"/> | 28 TITLE <input type="checkbox"/> |
| 29 TITLE <input type="checkbox"/> | 30 TITLE <input type="checkbox"/> | | | | | |



CHILD'S NAME _____

PARENT SIGNATURE _____

