



FOR THE L VE OF READING CHALLENGE

Mark off each day in February you read aloud
15 MINUTES or more during the challenge.

| SUN | MON | TUES | WED | THUR | FRI | SAT |
|-----|-----|------|-----|------|-----|-----|
| | | | | | | 1 |
| 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 |

YOU CAN READ ONE OF YOUR FAVORITE IMAGINATION LIBRARY BOOKS OR ANYTHING YOU LIKE!

Send us your completed sheet by March 5th to be entered in a random drawing for fun prizes!

Parent's Name: _____ Email: _____

Phone: _____ Child's First Name: _____ Age: _____

Entries can be sent to info@bestbeginningsalaska.org, via our Facebook page, or mailed to us at 3350 Commercial Dr. Ste. 104A, Anchorage, AK 99501.



BEST BEGINNINGS
Alaska's Early Childhood Investment