

Middle Grade Book Box Form - Ages 7-12

Book Boxes for young readers

* Indicates required question

1. Email *

2. Name (First & Last) *

3. Library Card Number *

4. Phone Number *

5. How old are you? *

Mark only one oval.

7 years

8 years

9 years

10 years

11 years

12 years

Juvenile Book Box

6. Genres you are interested in *

Check all that apply.

- Animals - Please specify (ex. Bear)
- Choose your own adventure
- Fantasy & Magic
- Graphic Novels
- Historical
- LGBTQ+
- Mystery
- Nonfiction - Please specify (ex. Biography)
- Reluctant Reader
- Scary
- Sports
- Theme - Please specify (ex. Friendship)
- Video games (ex. Minecraft)

7. Please specify any specific topics you are interested in

8. Genres you are **NOT** interested in - Please choose all that apply *

Check all that apply.

- Animals - Please specify (ex. Bear)
- Choose your own adventure
- Fantasy & Magic
- Graphic Novels
- Historical
- LGBTQ+
- Mystery
- Nonfiction - Please specify (ex. Biography)
- Scary
- Sports
- Theme - Please specify (ex. Friendship)
- Video games (ex. Minecraft)
- Not Applicable - I like everything

9. Please specify any specific topics you are **NOT** interested in

Anything else we should know?

10. Some of our boxes contain tasty treats please let us know of any allergies

11. Anything else we should know?

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