2018-2019 DVEF BATTLE OF THE BOOKS - TEAM FORM

Dear Student:

The Battle of the Books Program is a VOLUNTARY reading competition designed to promote your love and appreciation of reading.

Team members are limited to three (3) students currently enrolled in either 5th or 6th grade at the participating school. Team members need to be in the same school, but not in the same grade. Once the first competition has begun, teams may not be modified unless the following conditions apply: if a team member has left the school, the remaining members may continue as a team of 2 or even 1. If a team member has moved away or becomes incapable of continuing due to health, an alternate (NOT currently on any team) may replace that team member. You may also replace with a team member with a student who is new to your school if he/she was participating in the Battle of the Books at his/her previous school site this year. Alternates MAY NOT be used to fill in for team members who are absent on the day of a competition or for members who have quit the Battle.

The 2018-2019 books are:

**Battle I (Oct/Nov):**
- ARTEMIS FOWL, Eion Colfer
- WHERE THE RED FERN GROWS, Wilson Rawls
- JENNIFER MURDLEY’S TOAD, Bruce Coville
- MY SIDE OF THE MOUNTAIN, Jean Craighead George

**Battle II (Jan/Feb):**
- A WRINKLE IN TIME, Madeleine L’Engle
- CASTLE IN THE ATTIC, Elizabeth Winthrop
- RULES, Cynthia Lord
- DOLL BONES, Holly Black

**Battle III (Mar/Apr):**
- BORROWERS, Mary Norton
- ISLAND OF THE BLUE DOLPHINS, Scott O’Dell
- THE GIRL WHO COULD FLY, Victoria Forester
- RIDING FREEDOM, Pam Munoz Ryan

Please list your TEAM INFORMATION below:

**SCHOOL:** Stetson Hills Elementary – DVUSD

**TEAM NAME (if you have one):**

**TEAM MEMBER #1:**

- **STUDENT NAME:** ____________________________
- **STUDENT SIGNATURE:** ______________________
- **GRADE:** ______
- **PH#:** __________________
- **HOMEROOM TEACHER:** ____________________

**TEAM MEMBER #2:**

- **STUDENT NAME:** ____________________________
- **STUDENT SIGNATURE:** ______________________
- **GRADE:** ______
- **PH#:** __________________
- **HOMEROOM TEACHER:** ____________________

**TEAM MEMBER #3:**

- **STUDENT NAME:** ____________________________
- **STUDENT SIGNATURE:** ______________________
- **GRADE:** ______
- **PH#:** __________________
- **HOMEROOM TEACHER:** ____________________

**LIBRARY CLERK SIGNATURE:** __________________________

Please return this form ALONG WITH YOUR PARENT CONSENT FORM to school library clerk

**NOTE:** Schools keep all SIGNATURE FORMS and TEAM FORMS and bring them with them to each Battle.