

RIVERSIDE COUNTY CARNIVAL PRESENTS

THE
READ & WIN PROGRAM

GRADES PRE-K TO 12

**RECEIVE A FREE TICKET TO THE
RIVERSIDE COUNTY CARNIVAL
JUST BY READING**

PRE-K & KINDER - 10 BOOKS

GRADE 1-3 - 10 BOOKS

GRADE 4-5 - 10 BOOKS

GRADE 6-8 - 10 BOOKS

GRADE 9-12 - 10 BOOKS

**ALL BOOKS SHOULD BE AGE-
APPROPRIATE & APPROVED
BY TEACHER OR LIBRARIAN)**

SPONSORED BY:

RIVERSIDE
county



MAY 29 -31
RIVERSIDECOUNTYCARNIVAL.COM/READ-WIN



READ & WIN CHALLENGE!

OPEN TO PRE-K - 12TH GRADE

EACH CHILD WHO RETURNS A COMPLETED FORM ON OR BEFORE THE MAY 10TH, 2026 DEADLINE IS A WINNER! TO RECEIVE AWARDS, READ AND FOLLOW THE RULES CAREFULLY:

- OPEN TO CHILDREN WITH GRADES PRE-K TO 12TH GRADE. ONE ENTRY PER CHILD.
- TEN AGE & GRADE APPROPRIATE BOOKS MUST BE READ BY THE CHILD - NOT TEACHER, PARENT, GUARDIAN, LIBRARIAN, ETC. ALL TEN BOOKS MUST BE LISTED.
- BOOKS COUNTED MAY BE READ FROM JANUARY 1, 2026 - MAY 10, 2026, AND MAY BE FROM ANY SOURCE - HOME, PUBLIC LIBRARY, SCHOOL, ETC.
- EACH BOOK TITLE MUST BE INITIALED BY A PARENT, GUARDIAN, OR LIBRARIAN. INCOMPLETE ENTRIES CANNOT BE ACCEPTED. THE FORM MUST BE FILLED OUT COMPLETELY TO RECEIVE THE PRIZE.
- DEADLINE: POSTMARK OR HAND DELIVER ON OR BEFORE MAY 10, 2026. NO LATE ENTRIES WILL BE ACCEPTED.
- ALL INFORMATION MUST BE LEGIBLE AND COMPLETE TO MAIL AWARDS.
- AWARDS: ONE GENERAL ADMISSION PASS TO THE FAIR AND EMAILED BY MAY 15, 2026. THIS INDIVIDUAL TICKET CAN BE USED ONCE FOR ANY DAY OF THE CARNIVAL WHICH RUNS MAY 29-31 2026.
- THE RIVERSIDE COUNTY CARNIVAL IS NOT RESPONSIBLE FOR LATE, MISDIRECTED ENTRIES, INCOMPLETE OR ILLEGIBLE ENTRIES.

**DEADLINE: POSTMARK OR HAND DELIVER THIS FORM ON OR BEFORE MAY 10, 2026:
RIVERSIDE COUNTY CARNIVAL LLC, 28924 OLD TOWN FRONT ST. #102 TEMECULA CA 92590**

BOOK TITLE: _____ INITIAL _____

BOOK TITLE: _____ INITIAL _____

BOOK TITLE: _____ INITIAL _____

BOOK TITLE: _____ INITIAL _____

BOOK TITLE: _____ INITIAL _____

BOOK TITLE: _____ INITIAL _____

BOOK TITLE: _____ INITIAL _____

BOOK TITLE: _____ INITIAL _____

BOOK TITLE: _____ INITIAL _____

BOOK TITLE: _____ INITIAL _____

NAME OF CHILD: _____

DATE OF BIRTH: _____ AGE: _____ GRADE: _____ PHONE: _____

ADDRESS/CITY/ZIP: _____

NAME OF PARENT OR GUARDIAN: _____

EMAIL OF PARENT OR GUARDIAN: _____



PHONE 951-499-1558

INFO@RIVERSIDECOUNTYCARNIVAL.COM