Parenthesis
Support & Parenting Education for Families

Let's Explore Classes Registration Form

SPRING SESSION 2008
April 30-May 28 2008

Parent/Guardian Name_____ Date_____

Child's Name_____ Birthdate_____

Address_____ City_____ Zip_____

Home Phone ( )_____ Emergency Phone ( )_____

Email Address _____

Please list all classes for which you are registering your child

1st Choice	2nd Choice	Class Name	Class Day	Class Time	Age	Fee

SIBLING CHILDCARE NEEDED ($48 per session)

Child's Name	Class Name	Age	Days/Times	Fee

TOTAL FEES $_____

I would like to donate to Parenthesis, a 501c3 organization. This gift is tax deductible as permitted by IRS regulations $_____

GRAND TOTAL $_____

I understand that Parenthesis assumes NO FINANCIAL OBLIGATIONS, BUT IN CASE OF ACCIDENT OR ILLNESS, PARENTHESIS has my authorization to secure any necessary medical attention for the enrollee above. I also agree to hold harmless PARENTHESIS, its employees, board members, and directors, for any injury which may occur in the course of this activity.

Parent/Guardian Signature_____

Payment Method (*Circle One*) Check Cash Visa MasterCard

Account Number _____

Cardholder Name_____

Expiration Date_____-_____ Amount of Charge $_____

Authorized Signature_____

Check #_____ Check Amount $_____ Cash $_____

Please make Checks payable to Parenthesis.

Mail to: Parenthesis, Attn: Class Programmer, 405 S. Euclid Avenue, Oak Park, IL 60302

Fax registrations to (708) 848-2269 For questions, call (708) 848-2227

United Way