

PARENT WORKSHOP REGISTRATION FORM

PLEASE FILL OUT: Each Adult attending the workshops needs to list their five choices in order of preference. You will be assigned two workshops. Sign-up your teen(s) if he or she will be attending the "Teen Talk!" workshop and grandparents if they will be attending the 1:00 p.m. "Grandparents" workshop.



Name _____

Name _____

(Circle) Mom Dad other _____

(Circle) Mom Dad other _____

Workshop choices in order of preferences:
(List name of workshop)

Workshop choices in order of preferences:
(List name of workshop)

#1 _____
#2 _____
#3 _____
#4 _____
#5 _____

#1 _____
#2 _____
#3 _____
#4 _____
#5 _____



"TEEN TALK" WORKSHOP SIGN-UP:



"TEEN TALK" WORKSHOP SIGN-UP:

Name _____
Name _____

Name _____
Name _____



"GRANDPARENTS" WORKSHOP SIGN-UP:

Name(s) _____

The grandparent workshop will be held Saturday at 1:00 p.m.

Please complete the following information:

- Address _____
- Home phone: _____
- Age of your multiples at time of convention (July) _____
- Age(s) of your other children at time of convention (July) _____

Please send form to: Susan Holloway, 3701 Crest Drive, Bakersfield, CA 93306. Or, e-mail it to convention@susanholloway.com. It must be received by **July 14, 2011**.