



Registration Form

Strengthening Families Courses at Keshequa Central School District

Please complete this registration form electronically and **email it to lc938@cornell.edu** or **print and return it to our office** (see address below). Couples, partners and parent teams are encouraged to attend together!

Your Name:

Spouse/Partner/Other Participant:

Address:

, NY

Phone: Alt. Phone:

Email:

To attend this program, will you need:

Transportation ? Yes, I need transportation No, I do not need transportation

Childcare ? Yes, I need childcare No, I do not need childcare

If you need childcare, please list the names and ages of your children that will attend childcare:

Children must be at least 3 years old to attend childcare – we apologize for any inconvenience.

Select the program you are registering for by checking the box (you may register for more than one class).

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| <p>Strengthening Families For Parents of Children Birth through Age 5</p> <p><i>Dates:</i> 9/24/18 6pm to 8pm <input type="checkbox"/> 10/1/18 at 10/16/18 Keshequa High School 10/22/18</p> <p>Participants must attend all 4 sessions to earn a certificate</p> | <p>Strengthening Families For Parents of Children Ages 5-12</p> <p><i>Dates:</i> 9/19/18 10/10/18 6pm to 8pm <input type="checkbox"/> 9/26/18 10/17/18 at 10/2/18 10/24/18 Keshequa High Sch.</p> <p>Participants must attend all 6 sessions to earn a certificate</p> |
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Participants & their families are invited to the Celebration Ceremony on October 25th!

Return Registration to:
 LC Cornell Cooperative Extension
 3 Murray Hill Drive
 Mt. Morris, NY 14510
Email: lc938@cornell.edu
Phone: 585-335-1752 or 991-5420

FREE! Courtesy of Keshequa CSD & Genesee Valley Health Partnership!
 Limited number of seats –
 Please Register Now!

Cornell Cooperative Extension of Livingston County provides equal employment and program opportunities. Accommodations for persons with disabilities may be requested by calling CCE of Livingston County no later than one week before the beginning of any event to make arrangements. Requests received after this date will be met when possible.



Please tell me a little about you and your family so that I can tailor the class to better meet your needs. This information is **voluntary**; answer or skip any or all questions. You may also print and bring this page to the first day of class.

What do you do really well as a parent/caregiver? What are you most proud of in your role as a parent?

What are your goals for this course? What do you hope to learn or become better at by taking this class?

What makes you proud of your children and family? How is your family strong and supportive of one another?

In what ways would you like your family to grow and become stronger?