Child & Family Institute
Programs for 2010-11
Registration Form

Please use the program descriptions on our website to select the classes you would like to attend.

Family Name:		Home Phone:	
Mom's Name:		Dad's Name:	

	Name of Program	Day/Session	Participant's Name	Birth date
1				
2				
3				
4				
5				
6				

_____ *X $100 non-refundable deposit* = $ _____
# of programs *Total deposit for 2010-11 year*

Are you....? (Please circle all that apply)

Presently enrolled *Sibling* *Meadow Maker* *Alum* *Brand new to CFI*

Please make checks payable to the Child & Family Institute.
330 Ravenswood Avenue, Menlo Park, CA 94025
Scholarships are available upon request. Please contact Debbie or Kris at 650- 328-2262

Office use: Date Received w/ Deposit _____