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**SENG Model Parent Support Group Registration Form**   
  
Last Name: First Name:  
  
2nd adult

Email:  
  
Phone Number(s):   
  
Number of Children:

Age(s)/Grade(s):   
  
Group Participation: I understand that all discussions/names of other participants and their children during SENG parenting sessions are to remain confidential. I understand that this is not a counselling group.  
  
Please email your registration as soon as possible. Please mail a check or money order to 17416 32nd avenue, Surrey, V3S0L5. A week before class a message will be sent to you indicating the time and place for you to pick up your SENG book. A $25.00 service fee will be charged for all returned cheques.   
  
I agree to the fee of $325.00, payable in advance. Receipts will be issued at the first session.   
  
Please make cheques payable to: NP Educational Services or Niovi Patsicakis

Signature(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_