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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)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_