



**Fall 2014**  
**PARENTING GROUP SERIES**  
**Registration**

Betsy Brown Braun  
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 (310) 459-9209  
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**Enrollment is first offered to current members until May 30. Thereafter, openings for new members are determined by spaces vacated by members who are not returning and will be filled on a first come, first serve basis.**

Parent(s) name(s) who will be attending the group \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Work phone \_\_\_\_\_

Email *(Please print especially clearly)* \_\_\_\_\_

Child's name \_\_\_\_\_ Age on 9/1/2014 \_\_\_\_\_ Birthdate \_\_\_\_\_ School Grade \_\_\_\_\_

Child's name \_\_\_\_\_ Age on 9/1/2014 \_\_\_\_\_ Birthdate \_\_\_\_\_ School Grade \_\_\_\_\_

Child's name \_\_\_\_\_ Age on 9/1/2014 \_\_\_\_\_ Birthdate \_\_\_\_\_ School Grade \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Amount Enclosed \_\_\_\_\_

Please check the group with the number of people for whom you are registering.

- |   |   |
|---|---|
| <input type="checkbox"/> <b>Group II</b>  | <input type="checkbox"/> <b>Group V morning</b> |
| <input type="checkbox"/> <b>Group III</b> | <input type="checkbox"/> <b>Group V evening</b> |
| <input type="checkbox"/> <b>Group IV</b>  | <input type="checkbox"/> <b>Group VI</b>        |

**Tuition:** \$275 per person per series (five monthly group meetings.)

*Sorry no refunds, credits, make-ups, or group substitutions.*

**Please return this registration with your check made out to:**

Parenting Pathways, Inc. ■ 847 Greentree Road ■ Pacific Palisades, CA ■ 90272

