

Registration Form



**Sexuality Workshop with a Focus on Healthy Relationships
Fall 2018**

Dates: Wednesdays – September 26, October 3, 10, 17 and 24th

Time: 6:45- 8:30 p.m.

Location: Extend-A-Family Head Office: 200-3300 Yonge Street, Toronto, ON M4N 2L6

Directions: [Please Click Here for Map](#)

Participant Information

First Name:

Last Name:

Address:

Apt #

City:

Postal Code:

Home #

Cell #

E-mail address:

Age:

Male

Female

Extend-A-Family Coordinator (if applicable):

Parent/Guardian Information

First Name:

Last Name:

Address Same as Above: _____

Or different:

Address:

Apt #

City:

Postal Code:

Home #

Work #

Cell #

E-mail address:

Please provide the following:

- Any information on your son or daughter that might assist us in our presentation tools i.e. allergies, trigger words, etc.
- Topics that you would like to see covered during the workshop series.

Emergency Contact

Name:

Phone #

Relationship:

I understand that a parent/guardian must accompany the young person during each of the five Wednesday evening sessions. Yes_____

Registration fee \$50. Fee enclosed Yes_____ No_____

If the fee presents an obstacle, please contact your Coordinator or Anne at: 647-292-5328.

Please return the completed registration form to the EAF office with a cheque payable to: **'Extend-A-Family'. Address: 200-3300Yonge St., Toronto, Ont., M4N 2L6**

Parent/Guardian Signature:

Date:

Any queries please contact: Marissa at mw@extendafamily.ca or 647-292-5357.