

Psychotherapy Associates
of North Reading and Amesbury

Parent Class Registration

To register for the parent class, Co-Parenting in Difficult Times, please first choose the date and location that is convenient for you. Then print out this page, and mail it to us along with your \$80.00 payment. Please print clearly.

Name: _____ Today's Date: _____

Address: _____

Home Phone: _____ Work Phone: _____

Date of class you wish to attend: _____

Location of class (please circle one):

Little School
North Reading

Medford High School
Medford

Northern Essex Community College
Haverhill

We need the name of your spouse so we can make sure you are not both taking the same class.

Spouse's name: _____

All classes take place on two different nights from 6:30 to 9:00 both nights. You must attend a separate class from your spouse, and your space in the class is reserved once we receive the \$80.00 payment. Please note that child care is not provided, and children are not permitted to attend the classes.

Please mail this form along with a check or money order for \$80.00 payable to PANR. (Do not mail cash.) Alternatively, please complete the credit card information below. (Note: we can only accept Visa or Mastercard.) Once we receive payment, we will mail a confirmation letter along with directions to the class you are attending. Please mail to:

PANR
324 Main St.
North Reading, MA 01864

If paying by credit card:

I authorize Psychotherapy Associates to charge my card in the amount of \$80.00

Name (as it appears on the card)

Credit Card Number

Exp. Date

CSV Security Code

Signature

Date