

Adventures in Learning Registration Form

Spring Session, Thursdays, March 2 through April 6, 2017

(If you need additional copies of this form, such as for friends, simply copy this one or contact the Shepherd's Center office, Phone (316)721-2208.)

Please fill out form completely –we do not retain your information in our files.

Name _____ Ph. # _____ I'm new _____ I'm back _____
Last First Cell # _____

Spouse _____ Ph.# _____ I'm new _____ I'm back _____
(if registering) Last First Cell # _____

Address _____ City _____ St. _____ Zip Code _____

E-mail address _____

Name of your Church _____ (optional)

How did you hear about Shepherd's Center?

Church _____ Friend _____ Newspaper _____ Other _____

In case of emergency please notify:

(Required each time you register—we do not keep information on file.)

Name _____ Phone _____

Name _____ Phone _____

Doctor _____ Phone _____ Preferred Hospital _____

ADVENTURES IN LEARNING FEE - \$40

Fee is non-refundable

Paid Lunch Reservations due by Noon, February 27 for the 1st Thursday

Number of registrations _____ x \$40 - _____

Number of luncheons _____ x \$9 each - _____

Week 1st _____ 2nd _____ 3rd _____ 4th no lunch 5th _____ 6th _____

Tax-Deductible Donation to Shepherd's Center of West Wichita - _____

Shepherd's Center of West Wichita is a non-profit 501(c)(3) organization.

Donations to Adventures in Learning Scholarship Fund - _____

Total - _____

Mail completed registration form and check made payable to:

Shepherd's Center of West Wichita

745 N. Westlink, Wichita, KS 67212

Note: If you're interested in the following classes, please check the appropriate blank so that adequate arrangements can be made and if there's a supply list, we can send it to you.

___ Bridge ___ Knitting ___ Woodcarving ___ Coloring ___ Table Games

If you are willing to volunteer in any of the following positions, please check the blank.

___ Provide Snacks ___ Mailing Committee ___ Program Committee ___ Lunch Setup ___ Door Greeter