

LoveEd

Registration Form

To be completed by parish:

Parish _____

Address _____ City _____ State _____ Zip _____

Start Date	Day of Week	Time	Type of Group
1.			
2.			
3.			
4.			

To be completed by participant:

Name _____ Email _____ Phone _____

Address _____ City _____ State _____ Zip _____

Current Plan for Study:

- Will attend sessions (highly encouraged)
- Home participation (via parish subscription)
- I understand that my registration includes:**
 - 1) my *LoveEd* Parent Guide (\$24.95 retail) and
 - 2) my personal access to streaming video of the *LoveEd* Video Lessons

I would like to order (\$24.95 each retail):

\$ _____ each

- Boys Level 1 Girls Level 1
- Boys Level 2 Girls Level 2

I'm interested in offering my gifts in these roles:

- Coordinating (list role) _____
- Coordinating (list role) _____
- Helping with (list role) _____
- Helping with (list role) _____

Registration: \$ _____

Plus Children's Books: \$ _____ x Qty. _____

Total: \$ _____

Paid by:

- Cash _____
- Credit Card _____
CC# _____
Expiration _____
Security Code _____