

MOPS of First Evangelical Free Church
Session #1 (September 2009 – January 2010) Registration Form

MOPS Registration:

Name _____ Birth date (mo/day/yr) ____ / ____ / ____
 Address _____
 City _____ State ____ Zip Code ____
 Home Phone (____) _____ Cell Phone (____) _____
 E-mail _____ Home Church _____
 Are you a returning MOPS mom from 2008-2009? (circle one) YES NO
 In what areas would you be interested in helping? (check one or more areas of interest) Hospitality
 Community Volunteer Creative Activities Fundraising Discussion Groups No, thank you

MOPPETS Information (Children in MOPS Childcare):

<u>Child's Name (first & last)</u>	<u>Child's Birth date</u>	<u>Allergies?</u> <i>Check if yes</i>	<u>Allergies</u> <i>Please specify</i>	<u>Boy or Girl?</u> <i>Circle one</i>
_____	_____	<input type="checkbox"/>	_____	Boy Girl
_____	_____	<input type="checkbox"/>	_____	Boy Girl
_____	_____	<input type="checkbox"/>	_____	Boy Girl
_____	_____	<input type="checkbox"/>	_____	Boy Girl

Authorized Adult(s) to pick up child(ren)? _____

Names of other children/siblings
 NOT in MOPS childcare: _____

Session #1 Fees Explanation:

- MOPS Meeting Fees: 9 meetings @ \$4.00 per meeting
- MOPPETS Registration Fees: 9 meetings @ \$3.00 per child (maximum amount to pay for is four children)
- MOPS International Registration Fee: Annual \$23.95 fee to register with MOPS International (due by second meeting)
- Payment Plans and Scholarships Available: Contact Laura Nothnagel, Finance Coordinator for information – (815) 708-7575

MOPS Meeting Fees:	\$36.00	<i>Moms new to MOPS get 1st meeting free!</i>			
MOPPETS Fees (circle one):	+	1 child	2 children	3 children	4+ children
		\$27.00	\$54.00	\$81.00	\$108.00
MOPS Intr'l Reg. Fee (annual):	+	\$23.95	◀ To be paid when you register – this is an annual fee		
Total Amount Due:	=	_____			

Make checks payable to: MOPS

50% Total Amount due at registration, balance due by first meeting unless payment plan arranged.

Fees are non-refundable. Completion of this Registration Form acknowledges a commitment to make all required payments.

MOPS OFFICE USE ONLY

Amt. Pd: _____	Date Pd: _____	Cash / Check <u>ck#</u> _____
Amt. Pd: _____	Date Pd: _____	Cash / Check <u>ck#</u> _____
Amt. Pd: _____	Date Pd: _____	Cash / Check <u>ck#</u> _____
Amt. Pd: _____	Date Pd: _____	Cash / Check <u>ck#</u> _____

Assigned Discussion Group: _____ MOPS Int'l Reg. Processed (date): _____

Mailing Address: MOPS of First Free Church ♥ 2223 N. Mulford Road ♥ Rockford, IL 61107