

YOUTH SEXUALITY SEMINAR

Friday, February 10 7-8:30 pm

Saturday, February 11 9 am-3:30 pm

REGISTRATION

Please return to Peg by February 5

Name _____

Address _____

Male Female Grade level in school _____

Phone _____

Parent's name(s) _____

Parent's cell phone _____

Youth - I understand that I am committing to be involved in the entire Seminar on both Friday night and Saturday. I understand that a meaningful experience depends on my full participation.

Youth's Signature _____

Parents - I agree to support my youth in their involvement in the Seminar. I will see that transportation is provided and we will make this event a priority for our youth and our family.

Parent Signature _____

A \$10 registration fee helps defray the costs of materials, lunch and snacks on Saturday.