



CHILD IMPACT SEMINAR REGISTRATION FORM

The state mandated course is four hours in length and is offered at Bedford Counseling Associates. Class options for the Manchester program include a single 4 hour session on Saturday morning from 8:45 am – 12:45 pm or; two consecutive Monday night sessions from 6:30 pm to 8:30 pm.

Please note: Co-parents must register separately and cannot attend the same seminar.

The Seminar fee is \$85 and is payable **prior to being assigned** to a class. Individuals receiving some form of public assistance may be eligible for a reduced rate. Please call (603) 628-7787 to determine eligibility or to register by phone.

Information required for registration: (Please complete all sections)

Attendee Name: First/Last			_DOB:
Maiden Name (if applicable)Interpre	eter needed?	_Language:_	
Street Address			
City	State	Zip	
Email	Phone_		
Full name of child's other parent			
Court Location	Driver's License	e #	
Court Docket Number: (located on court documents) _			_ (*REQUIRED TO ENROLL)
Cardholder Name:		Total	Amount:
Credit Card Number:		Expira	tion Date:
Charge to: VISA MASTERCARD	_AMEXDISCO	OVER (CVC Code:

Pay by Check/Money Order: Please copy this completed form (for your records) and send form with check/money order made payable to **Bedford Counseling Associates** to: The Mental Health Center of Greater Manchester, Attn: Child Impact Program, 2 Wall Street, 2nd floor, Manchester, NH 03101

<u>Note</u>: After payment is received, you will be assigned to a seminar and notified of class date via the mail. Upon completion, each participant and the court will receive a certificate verifying attendance.

PARTICIPANTS MUST ARRIVE 15 MINUTES PRIOR TO START OF CLASS. NO LATE ADMISSIONS WILL BE ALLOWED. LATE ARRIVALS WILL AUTOMATICALLY RESULT IN THE NEED TO RE-SCHEDULE THE CLASS.

Class Preference: Saturday 8:45 a.m. - 12:45 p.m. Monday 6:30 p.m. - 8:30 p.m. First Available