

Co-Parenting for Resilience Registration Form

PLEASE PRINT

First Name:Midd	lle Initial: Last Name:	· 	
Address:	А	\pt	
City:	State:	Zip:	
Day Phone:	Ext: Evening Phor	ne:	
Gender: Male Female	Ethnicity: 🗖 Hisp	anic/Latino	
Race: White			
Court Case #:			
County filed	Judges Name:_		
Class enrollment preference:			
1 st Choice:/	2 nd Choice lass) (Co	unty)	//
You may request that another person not not attend the same seminar.	attend the same seminar as y	you. Parties with prote	ective orders may
I prefer not to attend the same co-parent	ing class as:		
Note: The first party to pre-register and pre party later chooses the same date, they will	• •		

Return this form with the specified fee and your completed survey (or survey verification form if completed online) to the OSU Extension office. (*You can mail all to 12827 NS 3650, Wewoka, OK 74884 if it will arrive before class*)

Send check or money order only. <u>Do not send cash</u>. Make checks payable OSU EXTENSION. Refund requests must be made in writing. Please arrive 10-15 minutes early to sign in and receive credit for your attendance. Credit will not be given for late arrivals or if you leave early. In case of inclement weather please listen to your local radio or call the Extension office to see if class will be held.

Childcare is not available. DO NOT BRING CHILDREN.

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