

OUR MISSION is to bring together groups of parents and others to practice effective communications skills in order to become more responsible in our families and more involved in our communities. We seek, with respect and honesty, to work through the strong feelings and conflicts that arise in family and community life.



**PARENTS FORUM**  
Annual Enrollment

\_\_\_\_\_ Date

**My membership . . .**

- |  |         |       |
|--|---------|-------|
| <input type="checkbox"/> Full: Individual or Household w/ copy of <i>Where the Heart Listens</i>   | \$35.00 | _____ |
| <input type="checkbox"/> Basic: Individual or Household (excludes copy of handbook)  | \$25.00 | _____ |
| <input type="checkbox"/> Young Adult or Senior (ditto)   | \$20.00 | _____ |
| <input type="checkbox"/> <i>I would like to receive a gift membership, if available, and I enclose a letter explaining my circumstances. *</i> |         |       |

**A gift membership . . .**

- |   |         |       |
|---|---------|-------|
| <input type="checkbox"/> Family member or friend (address below)  | \$35.00 | _____ |
| <input type="checkbox"/> <i>Community member*</i> <input type="checkbox"/> <i>in the Boston area</i> / <input type="checkbox"/> <i>anywhere</i> | \$35.00 | _____ |

*\* Please  do /  do not give my contact information to the person whom I sponsor or who sponsors me. Members will be given each others contact information only if both agree.*

**Handbooks . . .**

- I would like \_\_\_\_\_ additional copies of *Where the Heart Listens*  
@ \$10.00 each = \_\_\_\_\_ + \$6.45 shipping & handling first copy  
and \$2.00 S&H each additional copy
- BOOK ORDER TOTAL: \_\_\_\_\_

**Additional donation to support program development**

\_\_\_\_\_

- Payment:**    by check or money order in US\$ enclosed      T O T A L: \_\_\_\_\_  
 by Western Union MTCN# \_\_\_\_\_ on \_\_\_\_\_ (date)  
 online through \_\_\_\_\_ on \_\_\_\_\_ (date)

**Member's Name** (Mr./Mrs./Ms.): \_\_\_\_\_

**Address:** \_\_\_\_\_  
Street / City / State / Zip Code and Country, if outside the USA  
\_\_\_\_\_  
Telephone / Fax / Email / Website

**Gift Recipient's Name** (Mr./Mrs./Ms.): \_\_\_\_\_

**Address:** \_\_\_\_\_  
Street / City / State / Zip Code and Country, if outside the USA  
\_\_\_\_\_  
Telephone / Fax / Email / Website

\*\*\* All donations are fully tax deductible \*\*\*