 REGISTRATION FOR ParentWISE

BSI’s ParentWISE workshop is designed for parents wanting to learn more effective ways of managing their child’s behavior. Parents will learn how to figure out why their child is behaving the way they are and effective ways to manage that behavior. Common behaviors of *anger, aggression, tantrums, defiance, impulsivity, anxiety, refusals,* etc. will be included. Parents will leave with practical tools they can use right away. Participants are limited and are not to exceed two people per family; register to reserve your spot. If the workshop is full, you may be placed on a waitlist. Payment must be made in full via cash, check or credit in order to hold your spot. This workshop is open to all; you do not have to be a client. There are no refunds unless BSI cancels for any reason. If there are not enough participants, the workshop will be cancelled.

*This form is* ***fillable*** *for easy completion and return via email OR it can be printed and sent/brought to BSI.*

*REGISTRATION FOR NEXT WORKSHOP DUE BY:*

|  |  |
| --- | --- |
| Name(s): Click here to enter text. | Phone: Click here to enter text. |
| Address: Click here to enter text. | Email: Click here to enter text. |

Number of people attending:

[ ]  1 [ ]  2

Choose date: ***Registration must be received by July 20!***

[ ]  Wednesday, July 26 9:30AM-11:30AM [ ]  Thursday, July 27 6:00PM-8:00PM

Please indicate your relationship to the child/children:

[ ] Mother [ ] Grandparent [ ] Foster Parent

[ ] Father [ ] Guardian [ ] Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about ParentWISE?

[ ] BSI Website [ ] BSI Staff or Therapist [ ] Word of mouth

[ ] Social Media [ ] BSI Email [ ] Flyers/Ads

Is your child currently a client of BSI?

[ ] Yes [ ] No

If no, was your child a client at BSI previously?

[ ] Yes [ ] No

Please list age(s) of child(ren):

|  |
| --- |
| Click here to enter text. |

To help us focus on the primary concerns of the group, please check any behaviors that are concerning to you:

[ ] Inattention [ ] Tantrums

[ ] Hyperactivity [ ] Defiance (refusals, disrespect)

[ ] Impulsivity [ ] Noncompliance (not listening, requires excessive prompts)

[ ] Anger [ ] Physical aggression

[ ] Verbal aggression [ ] Self-injurious behaviors

[ ] Other:

|  |
| --- |
| Click here to enter text. |

We encourage parent input participation and sharing! Are you interested in sharing specific behavior incidents to be used as an example for teaching purposes?

[ ] No thanks, I just want to listen and learn

[ ] Sure! Our house is never dull and I have plenty of examples that I can share!

Please describe a behavior incident you would be willing to share:

|  |
| --- |
| Click here to enter text. |

Cost is $25 per person and includes a 2 hour workshop and resources. I wish to:

[ ]  *Pay by check*: Make check payable to Behavior Specialists of Indiana via mail or in person. Address: BSI, 2101 Comeford Rd. Valparaiso, IN 46383.  Payment must be received to confirm your spot.

[ ]  *Pay by cash*: Please bring or send payment to the BSI office.  Address: BSI, 2101 Comeford Rd. Valparaiso, IN 46383.  Payment must be received to confirm your spot.

[ ]  *Pay by credit card*:

[ ] Visa [ ] MasterCard [ ] Discover [ ] American Express

Credit/Debit Card Payment:

|  |
| --- |
| Number: Click here to enter text. |
| Exp date: Click here to enter text. |

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(You will be asked to sign when you arrive for the workshop if you are submitting via email)

Please provide this registration to the office in person, via mail, fax (219-464-4318) or email to tkitchel@behaviorspecialists.net **BY JULY 20.** Thanks for registering!
If you have any other questions, please contact Tonia Kitchel at tkitchel@behaviorspecialists.net or 219-462-6705 ext 102.