

REGISTRATION FOR POSITIVE DISCIPLINE CLASSES
GLENDA MONTGOMERY/POSITIVE PARENTING

Name_____

Address:_____

Phone:_____

Email:_____

Starting date:_____ Place:_____

Individual or couple?_____ (If you register as an individual please do not plan to alternate with your spouse. Individual means one person. Thanks)

If you are registering as a couple, please tell me your partner's name and email information:_____

Please enclose a check (made out to Positive Parenting) and mail this registration form to:

Glenda Montgomery
9132 SW 57th Ave
Portland, Oregon 97219

Thanks! I'll look forward to seeing you!
-Glenda