



# Friends of Children with Special Needs

## 2010 Spring Semester South Bay Regular Gathering

### Registration Form

Registration Deadline: 12/31/09

After deadline, the late registration will be accepted on a space available basis.

#### A. Parent/ Guardian Information

<b>Last Name</b>		<b>First Name</b>		<b>Relation to Student</b>	
<b>Home Phone</b>			<b>Cell/Work Phone</b>		
<b>Address</b>			<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Email Address</b>					

- I am NOT a FCSN member. Please let me know how to become a member.
- I/We would like to stay for dinner. How many family members will stay for dinner?
- I would like to stay with my \_\_\_\_ year old child (age from 1 to 12) during the class hour.  
My child and I will be assigned to the Kitten Group and I will be responsible for my own child.

#### B. Participant Information & Fees (Please make check payable to: FCSN)

Name of Participant	Age	With Special Needs	Registered as a	Class Materials Fee (\$ 10.00 per student)
		( Yes / No )	( Student/ Helper )	
		( Yes / No )	( Student/ Helper )	
		( Yes / No )	( Student/ Helper )	
<b>Registration Fee (per family)</b>				<b>\$ 100.00</b>
<b>Subtotal</b>				
<b>Register before 12/31/09 deadline</b>				<b>-\$ 20.00</b>
<b>Total</b>				

#### C. I/We would like to volunteer for (Please select at least one)

1.  Teacher      2.  Classroom Helper      3.  Facility Set-Up/Clean-Up
4.  Security      5.  Meal Preparation/Serving      6.  Kitchen clean up
7. Others. Please Specify:

<b>Parent/ Guardian's Signature:</b>	<b>Date:</b>
--------------------------------------	--------------

FCSN South Bay Regular Family Gathering			2010 Spring Semester	
<b>Dates</b>	Feb. 6, 20	March. 6, 20	April. 3, 17	May 1, 15
<b>Time &amp; Activity</b>	4:30~6:30 pm Seminar/ Classes	6:30~7:55 pm Dinner/ 3 <sup>rd</sup> hr. program	7:55~8:00 pm Clean up	
<b>Location</b>	Westhope Presbyterian Church/Taiwanese-American Presbyterian Church 12850 Saratoga Ave., Saratoga, CA 95070			
<b>Payment</b>	Check#			
<b>Contact Information</b>	Dora Chou 2300 Peralta Blvd., Fremont, CA 94536			Tel: 510-739-6900 x3305 Fax: 510-225-1328

**Please detach the top portion with your payment, mail to Dora Chou before 12/31/2009.  
Retain the lower portion for your record. Thank you!**