



REGISTRATION FORM MUMS LAUMC 2010-11

Welcome to MUMS! Please complete this form so we can learn more about you.

Date: _____ Last name: _____ First name: _____

Home phone: _____ Work/Cell phone: _____

Address: _____

Birthday (day/month): _____ Email: _____

How did you hear about the LAUMC MUMS group?

Please choose Option 1 or Option 2 or Both	Cost
Option 1: Non-Cooking Meetings	\$140
Option 2: Cooking Meetings	\$60-\$75**

**Please pay what you can afford. There will be a supplemental charge for each class of \$5 to \$10 to pay for the cost of ingredients. This additional fee will be collected during the class.

Please complete the following information about your child(ren):

Name	Age	Male / Female	Need childcare during MUMs meetings? (Y/N)

For MUMS' Group Use Only:

Date registration form received: _____

Date registration fee received*: _____

**Scholarships are available for those unable to pay the fee. Contact Amy at amy@vitamail.com for more information.*
