

# THE PEACE CENTER

## VIP Registration

Date \_\_\_\_\_

Students Name \_\_\_\_\_ Age \_\_\_\_\_

Parents Names \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Telephone, Day \_\_\_\_\_ Eve \_\_\_\_\_

e-mail \_\_\_\_\_

Referred by \_\_\_\_\_

Registration requires payment in advance of \$125.00 for the 12 sessions

\_\_\_ Please contact us about applying for financial assistance.

Check for \$ \_\_\_\_\_ payable to "The Peace Center" is enclosed, or:

Charge \$ \_\_\_\_\_ to my \_\_\_ Visa \_\_\_ MC credit card:

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ Exp. date: \_\_\_ / \_\_\_

Name on card \_\_\_\_\_

Parents and guardians need to participate in 6 classes in a parallel program concurrent with the youth sessions.

Please send more information about the optional Parent Component \_\_\_\_\_

Mail this form with your payment to:

The Peace Center  
102 W. Maple Ave.  
Langhorne, PA 19047-2820