



TITUS SINGLE PARENT MENTORING REGISTRATION FORM

Parent(s) Name: _____ Phone #: _____

Address: _____

Email Address: _____ Date: _____

Child's Name/ Political title (Each child will select a political office each year of the program)

- | | | | |
|----|-------|------------|--------------|
| 1. | _____ | Age: _____ | Grade: _____ |
| 2. | _____ | Age: _____ | Grade: _____ |
| 3. | _____ | Age: _____ | Grade: _____ |
| 4. | _____ | Age: _____ | Grade: _____ |

Completion of enrollment form, deposit and camp selection are required by 3/31/2019 – Parents are responsible for registering on time and providing required financial documents for camps as outlined by camp and Titus. Titus will contact selected camps for additional discounts and scholarships, however, YOU MUST APPLY!

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SUMMER CAMPS: (Visit www.titusparenting.org) click on the links for desired camps and list below:

Parent name _____ Initial

REGISTRATION BEGINS ON FEB 17TH AND ENDS ON MAR 31ST Membership fees are listed below:
YOU MAY PAY FOR REGISTRATION AT: titusparenting.org or send cashier payable to Titus Single Parent Mentoring

NEW PARENT - \$135.00 (ANNUAL FEE)

- 1ST CHILD - \$0.00
- 2ND CHILD - \$25.00
- 3RD CHILD - \$15.00
- 4TH CHILD - \$10.00

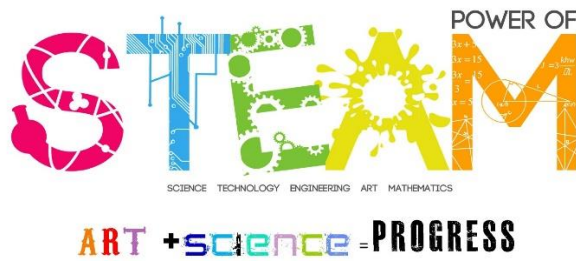
RETURNING PARENT: \$100.00 (ANNUAL FEE)

- 1ST CHILD - \$00.00
- 2ND CHILD - \$25.00
- 3RD CHILD - \$15.00
- 4TH CHILD - \$10.00

DO EITHER OF YOUR CHILDREN HAVE AN IEP? Yes / No. If Yes, provide child's name & describe:

DO EITHER OF YOUR CHILDREN HAVE ALLERGIES? Yes / No. If Yes, provide child's name & describe:

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT RONDA HARPER JOHNSON (Executive Assistant) by phone or email at 562-225-9446 or Laronda_Harper@yahoo.com. (NEXT PAGE T-SHIRT, CHEF ATTIRE, LAB COAT ORDERING FORM, & SPECIAL EVENT'S TICKETS)



CUSTOM TITUS APPAREL

(Orders will be processed on February 21, 18)

Parent Name _____ Phone: _____

Email: _____

Date: _____

PLEASE INDICATE T-SHIRT SIZE & QUANTITY	Total
CHILD (S)___ (M)___ (L)___ COST \$10.00	
ADULT ___ (XL) _____ (XXL) _____ COST \$20.00	
PLEASE INDICATE CHEF HAT/APRON SIZE & QUANTITY	
CHILD (S)___ (M)___ (L)___ COST \$19.99	
ADULT (S)___ (M) ___ (L)___ (XL) _____ (XXL) _____ COST \$24.99	
PLEASE INDICATE LAB COAT SIZE & QUANTITY	

CHILD (S)____ (M)____ (L)____ COST \$19.99	
ADULT (S)____ (M)____ (L)____ (XL)____ (XXL)____ COST \$24.99	
Total amount due	
Total amount paid	
Total balance due	

**Registration fee paid
(Cashier Check or Online)
www.titusparenting.org**

Parent(s) Name: _____

Phone #: _____

Address:

Email Address: _____

Date: _____

Parent enrollment fee: New \$135 _____ **Returning \$100** _____

Child's Name

_____ Age: _____ Amt.: \$00

_____ Age: _____ Amt.: \$25

_____ Age: _____ Amt.: \$15

_____ Age: _____ Amt.: \$10

Parent: _____

Membership payments:

Single Payment \$ _____ **Date:** _____

Payment Plan:

2 Payments \$ _____ **Bal. \$** _____ **Date:** _____

2 Payments \$ _____ **Bal. \$** _____ **Date:** _____

3 Payments \$ _____ **Bal. \$** _____ **Date:** _____

3 Payments \$ _____ **Bal. \$** _____ **Date:** _____

3 Payments \$ _____ **Bal. \$** _____ **Date:** _____

**Total Pancake Breakfast Fundraiser
Tickets ordered/sold**

(Final ticket orders will be processed on _____)

\$10 each (For each ticket sold, student receives \$5 for registration or camps)

Parent Name _____ **Phone:** _____

Email: _____

Date: _____

Total ordered _____ **Total amount paid** _____

Parent name: _____

Student name: _____

Camp Title	Camp Begin Date	Registered Y//N	Fee	Amount Due	Camp Contact Name

Parent name: _____

Student name: _____

Camp Title	Camp Begin Date	Registered Y//N	Fee	Amount Due	Camp Contact Name

Parent name: _____

Student name: _____

Camp Title	Camp Begin Date	Registered Y//N	Fee	Amount Due	Camp Contact Name