

FAMILY SUPPORT KIDS & TEEN PROGRAM REGISTRATION FORM



1. CHECK ALL DATES THAT YOU WOULD LIKE TO ATTEND **(in order of preference)**
2. RETURN THIS REGISTRATION FORM TO FamilySupport@charlesrivercenter.org
3. LOOK FOR AN EMAIL WITH YOUR CONFIRMED DATES (Reminder: registration goes not guarantee placement on those dates)
4. MARK ALL CONFIRMED PROGRAMS INTO YOUR CALENDAR!

Please note: Registering for our programs does not guarantee placement. Due to the continued increase in popularity of our programs and maintaining staffing ratio, your child may not receive all days requested. Once all registrations have been submitted by the deadline, we do our best to distribute dates evenly amongst registrants. We apologize for any inconvenience this may cause in your planning. Thank you for understanding.

Individual's Name: _____

Address: _____ Phone: (____) _____ - _____

Parent(s)/Guardian(s): _____

Email Address: _____ Child's Age: _____ D.O.B. _____

Primary/Secondary Disability: _____



Please number each program in order of preference 1 being the highest!

Kid's Break

Ages: 12-21

March 5th AM__ PM__

March 19th AM__ PM__

April 2nd AM__ PM__

April 30th AM__ PM__

Please check here if you have *not* completed a program intake

All programs require an intake interview. If you are newly interested in Family Support programs, please contact a program Coordinator to schedule one.

Jacqueline Milian (Program Director)
FamilySupport@CharlesRiverCenter.org

781-400-4130

Teen Night

Ages 13-21

March 25th _____



**Mark your calendars for
April Vacation Program :**

April 18th-22nd