

Date: _____

Call taken by: _____

These 6 hour workshops are held once a month alternating between two Monday evenings from 6 - 9 pm and one Saturday from 9 am - 4 pm with a 1 hour break.

Please number up to three dates in order of preference. (1 = first, 2 = second, etc)

We will call you to confirm registration.

2020 Parents Apart[®] workshops

____ January 6 & 13, Mondays

____ February 15, Saturday

____ March 9 & 16, Mondays

____ April 11, Saturday

____ May 11 & 18, Mondays

____ June 13, Saturday

____ July 13 & 20, Mondays

____ August 15, Saturday

____ September 14 & 21, Mondays

____ October 17, Saturday

____ November 9 & 16, Mondays

____ December 12, Saturday

Name _____

Mailing Address _____

City _____ State _____

Zip Code _____

Phone: (work) _____

(home/cell) _____

Email: _____

Full name of other parent: _____

Are you Court Ordered? ____ Yes ____ No

Docket #: _____

File #: _____ **# of Children** _____

If not court ordered, referral source: _____

Are you in danger of your partner or ex-partner doing any of the following:

- Physically hurting you by pushing, grabbing, slapping, hitting, choking or kicking you?
- Threatening to hurt you or your children or someone close to you?
- Stalking, checking up on you or following you?
- Making you afraid?

____ **YES** (You will be contacted by the *Parents Apart[®]* Coordinator). **Please indicate the safest way to contact you.** _____

____ **NO** (None of the above applies to me or I choose not to answer at this time.)

For help and support if you answered YES
call the Advocacy Center, 607-277-5000 (24 hr)

www.theadvocacycenter.org

Cost: \$60—\$100 program fee*
payable to CCE-Tompkins

Please indicate your choice of payment:

____ **check enclosed, amount** _____

____ **pay when attending, amount** _____

____ **credit card (we'll call you)**

____ **request a reduced fee (we'll call you)**

*Program fees are based on a self-determined sliding scale. Amounts over \$60 are used to provide scholarships for those in need, and represent a tax-deductible contribution to our program.

Phone: 272-2292

Fax: (607)272-7088

www.ccetompkins.org

Return completed forms to:

Emailed: jcg33@cornell.edu

Mailed: Parents Apart, attn.: Jennifer Gray
Tompkins County Cooperative Extension
615 Willow Ave, Ithaca, NY 14850