

**“FOSTER PRIDE & EMPOWERMENT:
Stepping Into Your Greatness”**

*A Self Development & Motivational Workshop
For Current & Former Foster Youth, Ages 15-25
Saturday, 5/31/08*

Registration

NAME: _____ AGE: _____ DOB: ___/___/___

SCHOOL/COLLEGE: _____ GRADE: _____ GRADUATION: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ E-MAIL: _____

LENGTH OF TIME IN CURRENT HOME: _____ TOTAL YEARS IN FOSTER CARE: _____

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CAREGIVER: _____ Foster Relative Other

PHONE: _____ E-MAIL: _____

FAMILY SOCIAL WORKER: _____ PHONE: _____

AGENCY: _____ E-MAIL: _____

COUNTY SOCIAL WORKER: _____ PHONE: _____

COUNTY: _____ E-MAIL: _____

\$100.00 REGISTRATION FEE SPONSORED BY:

NAME: _____

COMPANY: _____

ADDRESS: _____

CITY _____ STATE: _____ ZIP: _____

CHECK (Make Payable to: For A Child's H.E.A.R.T, Inc.

CREDIT CARD: TYPE: _____ # _____

3-Digit CODE _____ EXP DATE: ___/___

WORKSHOP REGISTRATION- PART 2
(To Be Completed By Participant)

WHAT IS IT THAT YOU WANT MOST IN LIFE?: _____

GOALS BEFORE COMPLETING HIGH SCHOOL/COLLEGE _____

GOALS AFTER COMPLETING HIGH SCHOOL/COLLEGE: _____

DO YOU BELIEVE THAT YOU CAN ACHIEVE YOUR GOALS? ___YES ___MAYBE ___NO

WHY? _____

DO YOU KNOW WHAT YOU NEED IN ORDER TO DO & HAVE THE THINGS YOU'VE
STATED?

WHAT WOULD YOU LIKE TO GET OUT OF THIS WORKSHOP? _____
