

# **BCR Program Registration**

## **MAILING ADDRESS ONLY:**

1401 Lawrence Street, NE, Washington, DC 20017  
202-526-3222 [info@brooklandcr.org](mailto:info@brooklandcr.org)

### **Participant Information:**

Name of participant (Full Name): \_\_\_\_\_ Date of Birth \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone Number: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_

*If residential staff is registering or bringing participant, please indicate the following:*

Name of guardian / staff person: \_\_\_\_\_

Agency Name: \_\_\_\_\_ Phone Number: ( ) - \_\_\_\_\_

### **Program Choice(s): \*See Schedule for program name and date options**

Program Name: \_\_\_\_\_ Program Date: \_\_\_\_\_

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Program Name: \_\_\_\_\_ Program Date: \_\_\_\_\_

### **In Case of Emergency:**

*\*Name of local friend or relative:*

Contact Name: \_\_\_\_\_ Phone Number: ( ) - \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: ( ) - \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: ( ) - \_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian / Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Spring 2013 Schedule

Program Name	Location	Dates & Time	Instructor	Fee / Details
Cooking	1401 Lawrence St. NE Washington, DC	1-3 pm, February 16 <sup>th</sup> 1-3 pm, March 16 <sup>th</sup> 1-3 pm, April 13 <sup>th</sup> 1-3 pm, May 11 <sup>th</sup>	Brother Paul Kennedy	\$35 for all (4) classes
Photography	Riverdale House 6107 44th Place Riverdale, MD 20737	2:30-4pm, February 16 <sup>th</sup> 2:30-4pm, March 30 <sup>th</sup>	Elizabeth Demaree	\$20 for (2) classes  <i>Bring your pictures from first class</i>
Jewelry Making	St. Anthony of Padua Parish 1029 Monroe St NE Washington DC 20017	1:30-2:30 pm, February 16 <sup>th</sup> 1:30-2:30 pm, March 16 <sup>th</sup> 1:30-2:30 pm, April 20 <sup>th</sup> 1:30-2:30 pm, May 18 <sup>th</sup>	Mimi and Shelly	\$35 for all (4) classes

**If a fee applies to a selected program, please send check or cash with Registration Form.**

**Make all checks payable to:**

Bethlehem House

*Memo:* Program Registration

**Mail to:**

Attn: Dolores Wilson BCR  
1401 Lawrence Street, NE  
Washington, DC 20017