



# 2014-15 MOPS International Registration Form

Welcome! Please complete this form so we can learn about you!

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Email: \_\_\_\_\_ Birthday: \_\_\_\_\_

Have you attended a MOPS group before?  Yes  No

If yes, where? \_\_\_\_\_

Are you registered for the MOPS International Membership?  Yes  No

Home church (if applicable): \_\_\_\_\_

How did you hear about this MOPS group? \_\_\_\_\_

Please list your child(ren)'s name(s) and birthdate(s):

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Husband's Name (if applicable): \_\_\_\_\_

**MOPS Mentor Membership Fee (Mentors only) ..... \$26.95**

**MOPS Membership Fee ..... \$24.95**  
(You will receive a Welcome Package from MOPS International)

**Save \$2 (Mentor Membership only) if you register by June 30, 2014.....\$ \_\_\_\_\_**

**Save \$3 (MOPS Membership only) if you register by June 30, 2014..... \$ \_\_\_\_\_**

**Group Fee ..... \$ \_\_\_\_\_**

**Total ..... \$ \_\_\_\_\_**

|  |
|--|
| <b>For Group Use Only</b>                          |
| Date registration received:                        |
| Discussion Group assigned:                         |
| Date registered for MOPS International Membership: |

**Welcome to MOPS International – where better moms make a better world**

