

# RSVP for Program

To: FSS Email: [fss@arcncr.org](mailto:fss@arcncr.org)

From: \_\_\_\_\_  
Your Name Child's name

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

I will attend (Please complete a separate RSVP for each training)

Please place an X in the box next to the class you plan to attend.

- Mommy & Me Story Time
- Teen Night
- Parent Support Group
- Sibling Support Group
- Membership Series
- Sibling Support Group
- CPR
- First Aid 3-Year Certification
- CPR/First Aid Refresher
- LISS application assistance
- Sib shop
- Other \_\_\_\_\_

Please check the *Newsletter or website calendar* and then complete the following information for the training you selected.

Date:

Time:

Place:

**\*PLEASE NOTE:**

FOR CPR: Please wear comfortable, loose fitting clothing, no long dangling jewelry and please do not wear lipstick or lip balm during this training.

**\*\*Important:** Please come to class on time. You will not be admitted into the class if you arrive late.

**\*\*If you RSVP to training *with less than one week's notice*, we cannot guarantee that you will receive a confirmation or be notified of cancellation or changes in the location of the training.**

\_\_\_ You are confirmed to attend the training on the date and time indicated above.

\_\_\_ The training you have selected is full. Please select another date and time.

Please Note: In the event of inclement weather or other possible emergencies that may result in the cancellation of scheduled classes, please call The Arc Northern Chesapeake Region's Administrative Office at 410-836-7177, Box #500 to hear whether classes are being held as scheduled or canceled. Box #500 is used for informational purposes only. You will be unable to leave a voice mail message in Box #500.