



"Believe in Success, Believe in Solutions, Believe in Sobriety"

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EVENT ENROLLMENT FORM

Child Information			
Name:			
Age:		Date of Birth:	
Address:			
City:		Zip Code:	
State:		Phone Number:	
How did you hear about us?			
Date of Event:		Location of Event:	
Guardian Information			
Name of Parent or Legal Guardian:			
Phone Number:		email:	
Program Requirements			
1) Signed Parent / Legal Guardian Permission Form			
2) Completed Enrollment Form			
3) Must be Age 7 to 12			
4) Wear loose, comfortable clothing, and be prepared for lots of fun!			
Program Schedule			
Day 1:		Day 2:	
9:00 - 11:30		9:00 -11:30	
Understanding Addiction -		"It's Good For Me"	
Everyone gets hurt by addiction.		Self Care and Problem Solving -	
		Taking care of myself is the most important job.	
11:30 -12:30 Lunch			
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12:30- -3:00			
"My Feelings Are OK"		12:30 -3:00	
Feelings		"I AM Special" I Feel Good About Me!	
		Today I celebrate the new ME!	

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