LifeWays
Nurturing Families
Inspiring Childcare

***www.lifewaysnorthamerica.org***

# Application for Enrollment

**Training Location and Date**_____

Name_____

Mailing Address _____

_____
(Please include street address, city, state and zip code.)

Cell phone number_____ Other phone number_____
(Please include area code)

E-mail _____ Birth date _____

Background in relationship to work with young children: (Please use back of page)

Primary interest in taking the LifeWays training: (Please use back of page)

How did you learn about the LifeWays training (please check all that apply):
__Word of Mouth __LifeWays website __LifeWays Facebook Page __Facebook Ad
__Print Ad (__Gateways __Lilipoh __Other) __On-line Ads (e.g., Waldorf Today)
__E-newsletter or other online info from LifeWays __Other blogs/websites
__Other:_____

***Please attach a one-page biography and submit with this application.***

____Enclosed is a check or money order for **$50.00** non-refundable application fee.

Signature _____ Date _____

**Please send this form and check *payable to LifeWays North America* to the Student Services Director of your Training: see Mailing Addresses.**

**Note: Registration is not complete until Application, $50 Fee and Payment Plan have been approved and processed.**