



**STARTING STRONG  
WORKSHOP FOR KIDS AGES 4 – 6  
AND THEIR PARENTS**

Starting Strong Workshops are an introduction to People Safety Skills for young children ages 4-6. Storytelling, puppets and interactive role-plays teach children simple but powerful skills to: act aware and confident, set boundaries, stop unwanted touch, handle unkind words, be safe with strangers, and get help from adults effectively, even when they are busy. This two-hour training introduces everyday safety skills (NOT physical self-defense skills) and guides adults in practicing these skills together with their children. At least one parent or guardian is required to attend with their child/children. This workshop helps answer the question, “How can we teach our children to be safe without scaring them?” in a fun, age-appropriate way. **Class location and directions will be sent at the time of enrollment.** This class is limited to 12 students.

**Fees:** \$45 per child. Discounts of \$10 will be given if more than one child enrolls from the same family in the same class. Limited scholarships may be available based on financial hardship considerations. Payment by Visa, MasterCard or Discover is also available. If you need a scholarship, please enclose a brief letter describing your situation and a payment of whatever you can afford.

**To Register:** Please call 719-520-1311 or send the enrollment form below with your payment to Kidpower, 10 Boulder Crescent, Suite 100, Colorado Springs, CO 80903. **We limit our workshop size and must have your payment in order to reserve your spot.**

*Please cut and keep the top portion for your records.*

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Name of Person Enrolling Child: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Are you the legal guardian of the child? \_\_\_\_\_

Child: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: M / F Nickname: \_\_\_\_\_

Child: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: M / F Nickname: \_\_\_\_\_

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

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

Primary Phone: \_\_\_\_\_ Other: \_\_\_\_\_

Email: \_\_\_\_\_ How did you hear about Kidpower? \_\_\_\_\_

Date of Class:  October 20, 2018 9:00 – 11:00 a.m.

I have enclosed payment for:  One child (\$45)  Two children (\$80)

Method of payment:  Check  
 Charge to my credit card:  Visa  MasterCard  Discover

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_ Signature: \_\_\_\_\_

Are there any health problems or special circumstances that would be helpful to know about your child? Does your child have any learning or emotional issues and/or past experience with abuse that would be beneficial for us to know about in preparation for class? (Please feel free to use the back of this page for additional space.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_