

Families Rock Registration Form

Class Date: _____

LOCATION: Lawrenceburg Firehouse -

300 W. Tate St. Lawrenceburg, IN 47025



Please fill out this form for all adults who will be attending the Families Rock program who live in the same household. Fee is \$75 per household. Adults living in a separate household must fill out their own registration form and pay their own \$75 registration fee. There is NO CHILDCARE.

Adult Information:

Name #1: _____ Date of Birth: _____

Phone: _____ Email: _____

Current Marital Status: _____

If still married or separated from spouse, please list their name: _____

Name #2: _____ Date of Birth: _____

Phone: _____ Email: _____

Current Marital Status: _____

If still married or separated from spouse, please list their name: _____

Address: _____

City _____ State _____ Zip Code _____

Are you active in any local church? ___ YES ___ NO

If yes, what church do you attend _____

Children Still Living at Home: (Please list Names and Ages)

Children NOT living in the Home: (Please list Names and Ages)

Describe below the family's current situation that led you to attend Families Rock

How long have you been working through this challenge? _____

Besides the names you have already listed , are there any other people involved in your family's situation? If so, list them below and their relationship to you?

Name: _____ Relationship to you: _____

Name: _____ Relationship to you: _____

Name: _____ Relationship to you: _____

Name: _____ Relationship to you: _____

Have you sought outside help for this challenge before? _____ YES _____ NO

If yes, who/what was the outside help? When did you seek this help? What were the results?

Has there been a diagnosis of any mental illness in the past for you or someone else in your family? _____ YES _____ NO If Yes, who was diagnosed and what was the diagnosis?

What is your goal(s) as it relates to your family's situation? What do you want to see happen?

Is there anything specific you hope to learn or tools/skills you would like to receive from attending Families Rock?

Every adult attending must sign below acknowledging that the above information is accurate and return via email before or on the day of the Families Rock Class. The cost of the Families Rock Class is \$75 per household and is due before or day of class.

Adult Signature: _____ Date: _____

Adult Signature: _____ Date: _____

For questions call the Rock Solid Families Office at 812-576-ROCK (7625)

*Once you have completed this registration form, please submit it via email by sending it to
Admin@rocksolidfamilies.org*