



MOPS Registration Form 2011-2012

Welcome to MOPS! Please complete this form so that we can learn some basic information about you.

First name: _____ Last name _____ Husband's name (if applicable): _____

Home phone: _____ Work/Cell phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Birthday: _____ Anniversary: _____ Email: _____

Have you attended a MOPS group before? Yes No

If so, where? _____

Do you attend a church? Yes No

If so, where? _____

How did you hear about this MOPS group? _____

If you are expecting a child, what is your due date: _____

Group Preference: (please choose day of the week and indicate which semester or full year)

Tuesday Morning(\$75) MOPS@ Tuesday Evening (\$55)

Sept-Dec Only (\$50) Jan-April Only(\$50) Full year (\$75)

MOPPETS (for Tuesday Morning Group only)

Please list your child(ren)'s names and birth dates (please list additional on a separate sheet):

Name: _____ Date of Birth: _____ Gender M F Special needs/allergies _____

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Names and Birth Dates of your older children who may be able to help in MOPPETS (Please list additional on separate sheet)

1. _____ 2. _____

3. _____ 4. _____

Please remember to sign up for committees on the reverse side!

Committee Sign-up

If you are able, we are asking each mom to please choose at least two committees to help with throughout the year. Thank you for your cooperation.

1. Hospitality Committee

- ___ a. Food, games, décor for special meetings
- ___ b. Special Events Planning: Help plan events outside of the MOPS meetings
- ___ c. Greeter: Help moms to feel welcome, direct moms to MOPPETS classrooms
- ___ d. Extra set-up or clean up: willing to help in addition to the service requirement below

___ 2. **MOPPET's Appreciation Committee:** to make baskets/thank you gifts for workers throughout the year

___ 3. **Favorite Things Committee:** donate your favorite thing to be given away as a prize

___ 4. **Publicity Committee:** write articles/stories for newsletter, create, print, fold or help distribute publications, or develop MOPS website

___ 5. **Crafts Committee:** help to plan, purchase supplies and prepare crafts ahead of time or lead creative activities

___ 6. **Pamper Me Day Committee:** help plan pamper me day, donate or find sponsors to donate prize and contribute ideas

___ 7. **Fundraising Committee:** help brainstorm, plan and organize fundraisers throughout the year.

Service Requirements: We require each mom as part of the Tuesday morning MOPS membership, to give back one meeting per semester by volunteering in the MOPPETS program. MOPS could not exist without your help in the child care program. We also require each mom to help set up for MOPS one time a year and help provide food for 2-3 meetings a year. We greatly appreciate your participation!

Please initial that you have read and agree to the Service Requirements.

Registration Deadline: All forms and fees must be received by August 1, 2011!

Please make checks payable to: Grace Community Church

Heather Lunkley

512 Penn Ct.

North Liberty, IA 52317

319-321-4374

gracecommunitymops@yahoo.com

For MOPS Group Use Only:

Date registration received: _____ Amt. Pd _____