

PCOM MOPS / MOMS NEXT-  
FALL/SPRING



  
**FIND YOUR FIRE**

Please complete this by 6/30/18

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

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

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

Email: \_\_\_\_\_ Birthday: \_\_\_\_\_

Have you attended a MOPS group before?  Yes  No If yes, where? \_\_\_\_\_

Home church (if applicable): \_\_\_\_\_

How did you hear about this MOPS group? \_\_\_\_\_

Please list your child(ren)'s name(s) and birthdate(s):

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Name(s) of child(ren) in MOPS Kids childcare (for children that will be 6 months or older)**

**MOPS Kids** \_\_\_\_\_

**IMPORTANT NOTE** :Childcare space is limited and given on a first-come-first-served basis.

**MOPS Membership Fee**

Mom Only Fall Semester -\$85

Mom Only Fall and Spring Semester—\$140

Mom with one child Fall Semester -\$125

Mom with one child Fall and Spring Semester -\$220

Mom with two children Fall Semester - \$150

Mom with two children Fall and Spring Semester -\$270

Mom with three children Fall Semester - \$170

Mom with three children Fall and Spring Semester—\$310

Checks should be made payable to "PCOM" and mailed with your completed registration packet to:

PCOM

Attn: MOPS Registration

26051 Marguerite Parkway, Mission Viejo, CA 92692