



Redirecting Children's Behavior

♥♥♥ positive, passionate parenting ♥♥♥

enrollment agreement

Name _____
Address _____
Home and Work Phone _____
Course Dates _____
Course Location _____
I agree to pay the tuition of _____
Payment: Cash ___ Paypal ___ Check ___ (make payable to Kelly Soban)

By signing this contract, I acknowledge the following:

- ✓ That I have read and understand these terms.
- ✓ That this course is for adults only and child care is not provided or included in the price.
- ✓ If I am dissatisfied with the course and have attended and participated in all course sessions and assignments, my tuition will be refunded (minus a \$ 30.00 material fee); otherwise, my tuition and deposit are nonrefundable.
- ✓ If I inform the instructor or my inability to attend the scheduled course dates at least 2 days prior to the start of the course, my tuition will be credited toward a course at a later date.
- ✓ My seat in the course is not guaranteed until full payment is received.
- ✓ In order to gain full benefits of this course, I will attend all 5 scheduled classes, return my course information sheet, and read the assigned materials prior to the course sessions.

Informed Consent

The Redirecting Children's Behavior is educational – it is not intended to be a substitute for family counseling or psychotherapy. Personal matters may be discussed during these classes and I agree to keep such matters confidential. All instructors are required by the state to report child abuse. No portion of the text, written or verbal presentations may be reproduced without the written consent of the author, Kathryn J. Kvols.

I have read and agree to the terms and conditions above.

Signature _____
Date _____

Signature _____
Date _____



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Name _____

Occupation _____

Spouse/Significant Other _____

Is this person taking the course? _____

1. How many children were in your family when you were growing up? _____
2. What were you in birth order? _____
3. What was your role in the family? Were you the "good" child, sports star, always in trouble, the brains, etc.?

4. What discipline methods did your parents generally use?

5. Describe a time when you were disciplined as a child. Then describe how you felt.

6. What discipline methods do you use with your child/children? What is your child's reaction to these methods?



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7. What discipline methods does your spouse/significant other use with your children? What are your children's reactions to these methods?

8. List three specific things that you would like to gain from taking this course.

- 1.
- 2.
- 3.

9. Please list your children's names, ages, grade in school and any information that might be helpful to your instructor.

Name	Age	Grade	Comments
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Mail all forms to:
Kelly J Soban
5325 Clemente Pl
San Diego CA 92117