Powerful Tools for Caregivers: Upcoming Class

As soon as you know the dates and times of your PTC class, please fill out this form and return it so we can advertise your class on the web.

Class Location (include physical address and city):
__________________________________________________________________________

_____ Traditional PTC Workshop _____ Children With Special Needs Workshop

When your class will meet
   Dates _________________________________________________________________
   Day of the week _______________________________________________________
   Time _________________________________________________________________

Class Leader(s) ___________________________________________________________

Contact info (phone & email) _______________________________________________

Sponsoring Organization(s): _______________________________________________

Cost and/or scholarship info _______________________________________________

Other information about the class you would like included on the Website
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Materials
Please order books, The Caregiver’s Helpbook, directly from the national PTC organization at http://www.powerfultoolsforcaregivers.org/book-store/

Number of PTC marketing posters you would like sent to you _____________
Number of PTC marketing brochures you would like sent to you _____________
Name and address to which posters and brochures will be sent
_________________________________________________________________________

Return this form:
Scan and email to: maryellen.laney@montana.edu
Fax to: (406) 994-1854
Mail to: MSU Extension, HHD / 320 Reid Hall / Bozeman, MT 59717-3370