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: lorelyn.mayr@montana.edu
Fax to: (406) 994-1854
Mail to: MSU Extension, HHD / 319 Reid Hall / Bozeman, MT 59717-3370