



THE CENTER FOR LOSS AND BEREAVEMENT

YES! SIGN ME UP FOR THE GRIEF EXPRESSION THROUGH PHOTOGRAPHY WORKSHOP ON SUNDAYS, MARCH 3RD AND APRIL 7TH!

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

E-MAIL: _____

TYPE OF LOSS AND DATE OF LOSS: _____

I WILL NEED CHILDCARE **I WILL NOT NEED CHILDCARE**

NAMES OF CHILDREN AND AGES: _____

PLEASE USE PROVIDED ENVELOPE FOR SUGGESTED DONATION OF \$20 FOR WORKSHOP

WE LOOK FORWARD TO SEEING YOU!