



## Next Steps 4 Stepfamilies Registration Form

Names (first and last) of participants and ages of children:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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

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

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

\_\_\_\_\_ \$25.00 enclosed ~ check made payable to UW-Extension

(Scholarships (full or partial) are available for those in financial need.

All information will be kept confidential. Contact Mary Wood or Annie Hobson for details ~ 608-685-6256.)

**Return registration and check to:**

**Buffalo County UW-Extension**

**PO Box 276**

**Alma, WI 54610**

