



2011-12 MOMS Next Registration Form

Welcome to MOMS Next! Please complete this form so we can learn some basic information about you.

Registration date: _____

Last Name: _____ First Name: _____ M.I. _____

Home Phone: _____ Mobile Phone: _____

Address: _____

City: _____ State: _____ Zip code: _____

Email: _____ Birthday: ____/____/____

Have you attended a MOPS group before? Yes No

If yes, where? _____

Are you registered for the MOPS International Membership? Yes No

Home church (if applicable): _____

How did you hear about the Woodlake MOPS group? _____

Please list your child(ren)'s name(s) and birthdate(s):

Name: _____	Date of Birth: _____
Name: _____	Date of Birth: _____
Name: _____	Date of Birth: _____
Name: _____	Date of Birth: _____

Husband's Name (if applicable): _____

MOPS International Membership Fee (2011-2012)..... \$25.00

Semester Dues (Amount due in September & January)..... \$25.00

Total \$50.00

Make checks payable to Woodlake MOPS. Please enclose this form along with your payment and mail to:

**Debbi McCartney
c/o WUMC MOPS
15607 Hampton Crest Place
Chesterfield, VA 23832**

For MOPS Group Use Only
Date registration received:
Discussion Group assigned:
Date registered for MOPS International Membership: