



Home Alone Safety Program **Online**

Registration Form

Parent/Guardian Name(s): _____

Address: _____

Email Address: _____

Preferred Contact Phone Number: _____

Home Phone: _____ Cell Phone: _____

Area of Residence:

City of Grande Prairie

County of Grande Prairie

Other: _____

How did you hear about the Home Alone Program?

Facebook

Family or Friends

Business/Organization

Instagram

School

Radio/Flyer

Twitter

My Child

Other

1) Child Name: _____ Age: _____

First

Last

Email for class attendance login: _____

2) Child Name: _____ Age: _____

First

Last

Email for class attendance login: _____

3) Child Name: _____ Age: _____

First

Last

Email for class attendance login: _____

Program Date Requested: _____

Due to the need to send links and attachments for this course we will communicate mainly by email for details related to the Home Alone Course. We use email to send registration confirmation, course reminders, course changes, attachments, information, and survey requests.

Would you like to keep in touch with us about other programs, activities, injury prevention tips and communications about Grande Prairie and Area Safe Communities and Safety City? You can do this by subscribing to our newsletter. **Join mailing list?** **Yes** **No**

Name: _____ **Email:** _____