

ADOPTED and WONDERING CHILDREN

Register by Sept. 10, 2007

Name: _____
Street: _____
City: _____ State: _____ Zip Code: _____
Phone: _____

Childs Name: _____
Date of Birth: _____

Enclose check or money order* payable to:

INNERVISION Christian Counseling, P.L.C.

or, pay with credit card (MasterCard or VISA only)

Card # _____

Authorized signature: _____

Expiration Date: _____

Mail to: INNERVISION Christian Counseling, P.L.C.
Celeste Sue Benskey, M.A.
340 N. Main STE 205
Plymouth, MI 48170

Mailed registrations will be confirmed by phone:

To register by phone, call (734) 454-0033

***Non-refundable fee is transferable.**