

C.A.R.S. Class Registration Form

PRE-REGISTRATION AND PAYMENT IS REQUIRED. WALK-INS ARE NOT ALLOWED.
SEATS ARE LIMITED. CLASSES FILL QUICKLY –REGISTER EARLY

- TIMES:** Weekday classes are 6 – 9:15 pm. Saturday classes are 9 am – 12:15 pm.
IMPORTANT: CLASS START TIMES DIFFERENT THAN THESE WILL BE NOTED ON MY WEB SITE.
Please arrive 5 - 10 minutes early to sign-in. If you are more than 15 minutes late, you will not be admitted to class.
- FEE:** \$25 per person (cash, check, money order, PayPal). Pre-payment required.
- LOCATION:** Youth First, 6701 Hwy 10 NW, Ramsey MN 55303
- BRING:** Pen for class. Feel free to bring a beverage/snack. There are no vending machines on site.
- IMPORTANT:** This is an adult only class, no children. Daycare is NOT provided.
No reimbursements for missed classes or for cancellations within 5 days of the class.
Phone calls will only be made if the class is full or if classes are cancelled.
Reminder email with instructions and directions to class will be sent a few days before class.
- INSTRUCTOR:** Chandra Kreyer | (651) 248-8256 | carseatchecker@hotmail.com

CLASS REGISTRATION FORM

Please complete, detach and send with your payment. PRINT LEGIBLY. ALL INFO IS REQUIRED.

ATTENDEE INFORMATION: Date of Requested Class: _____

Name: _____

Personal Email: _____

Personal Cell Phone: (_____) _____ Daytime Phone: (_____) _____

Personal Address: _____ City/Zip: _____

Organization (ONLY if applicable): _____

Check one: Home Daycare Daycare Center Foster Care/Adoption Other _____

VERIFICATION OF COURSE COMPLETION - REQUIRED

Attendance and completion of the course will be marked complete through the Develop web site.

To register for a Develop ID: <https://www.developtoolmn.org>

- If you have a Develop ID, you will be able to print your course completion summary showing you have successfully completed the course. Develop ID# _____
- If you do NOT have a Develop ID - you will need to provide your case worker OR supervisors email address and phone number on your registration. Your course completion information will be sent directly to them.

Case Worker/Supervisor Email: _____ Phone: _____

PAYMENT INFO

CHECKS WRITTEN TO: Chandra Kreyer

MAILING ADDRESS: Chandra Kreyer, 5696 - 154th Cove NW, Ramsey, MN 55303

* It is against the law to write a bad check in MN. Checks returned to us for nonpayment are subject to a service charge of \$30. An additional civil penalty may be imposed on checks returned for nonpayment after 30 days. (MN Statute 604.113)