

Powerful Tools for Caregivers: Upcoming Class

As soon as you know the dates and times of your PTC class, please fill out this form and return it so we can advertise your class on the web.

Class Location *(include physical address and city):*

____ **Traditional PTC Workshop** ____ **Children With Special Needs Workshop**

When your class will meet

Dates _____

Day of the week _____

Time _____

Class Leader(s) _____

Contact info *(phone & email)* _____

Sponsoring Organization(s): _____

Cost and/or scholarship info _____

Other information about the class you would like included on the Website

Materials

Please order books, *The Caregiver's Helpbook*, directly from the national PTC organization at <http://www.powerfultoolsforcaregivers.org/book-store/>

Number of PTC marketing posters you would like sent to you _____

Number of PTC marketing brochures you would like sent to you _____

Name and address to which posters and brochures will be sent

Return this form:

Scan and email to: deborah.albin@montana.edu

Fax to: (406) 994-2013

Mail to: MSU Extension, HHD / 316A Herrick Hall / Bozeman, MT 59717-3540