Application

Your answers to the following questions will determine your eligibility and will be kept strictly confidential.

First Name:		Last Name:			
Address:		City:		Postal Code:	
Phone #:		Cell #:			
E-mail:				Date:	

What kind(s) of experiences do you have caring for children?

_____
_____
_____
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_____

Do you have pets? ☐ Yes ☐ No

If so list types of pets?

_____
_____

Do you have at least 2 exit doors on the main floor of your home?	☐ Yes	☐ No

Return completed application to Family Dynamics in person, by mail, fax or e-mail.

Anne Grewar: agrewar@familydynamics.ca **Or** **Jennifer Couillard:** jcouillard@familydynamics.ca