

# STRENGTHENING Families PROGRAM



A **FREE\*** program for parents & caregivers to attend **with** their children ages 10-13.

## PROGRAM INCLUDES:

- ✓ fun youth and family activities;
- ✓ free family meal; childcare for kids 3-9;
- ✓ ways to strengthen family communication;
- ✓ why preteens/teens act the way they do;
- ✓ how to work through problems together;
- ✓ how to avoid problems with alcohol and other drugs.

A Seven Week Series For  
Middletown Middle School Families!

**Wednesdays:**

**Oct. 5, 12, 19, 26,  
Nov. 2, 9, 16, 2011**

Snow Date: November 30, 2011

**5:45 - 9:00 PM**

At Middletown High School  
Gardner Ave. Ext., Middletown, NY 10940

**"Parent Only" Information  
Meeting on Sept. 28, 6-8 PM**

*Space is limited to 10 families: please register early!*

**FOR MORE INFO CALL**

**Mrs. Kim Gurda at Monhagen  
845-326-1759**

**Mrs. Lynn Smith at Twin Towers  
845-326-1647**

**"This program has helped my family in a BIG WAY!"**

**"We totally enjoyed the program. It was EXACTLY  
what we needed and it helped tremendously."**

**"We've learned to listen more, have family meetings  
and have FUN together!"**



Cornell University  
Cooperative Extension  
Orange County



The Alcoholism  
and Drug Abuse  
Council of  
Orange County

\*There is no charge for this program due to generous funding provided by Enlarged City School District of Middletown 21st Century Grant.

Cornell University Cooperative Extension provides equal program and employment opportunities. Please contact our office if you have any special needs.

## STRENGTHENING FAMILIES REGISTRATION FORM - PLEASE RETURN TO

Twin Towers Middle School, 112 Grand Ave., Middletown, NY 10940, Attn: Counseling Office **OR** Monhagen Middle School, 555 County Route 78, Middletown, NY 10940

\_\_\_\_\_  
First & Last Name of Parents/Caregivers attending series (print clearly)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
First and Last Names & Ages of Children 10-13 years attending series

\_\_\_\_\_  
E-Mail Address

\_\_\_\_\_  
Day Time Phone Numbers

We Need Childcare (ages 3-9) \_\_\_\_\_ Names/Ages of Children needing Childcare