

May 2008

Dear Mother of Preschoolers,

Thank you for your interest in the new MOPS group at Applewood Baptist Church. The enclosed information packet will hopefully provide you with the information you need to be part of this new and exciting ministry at ABC!

As you may know, this is a new group and is still in the development stages. We do not know yet how big the group will be. As a result, we may find that we start small and keep meetings fairly simple. I hope you will bear with us as we develop the group and grow together. We hope to learn together from speakers or teaching material and from each other, to have meaningful fellowship, get a break from our kids and to express ourselves through creative activities. We would welcome your input regarding topics of interest for fun or for needed support.

To make our group work, we must be a community of women, working together for common goals. I am looking for volunteers for various levels of leadership. If you are interested at all, please do not hesitate to contact me. You do not have to have special skills; there is a job for anyone and everyone! I can provide information of lots of opportunities at various levels and would be happy to send you a leadership application.

Please contact me if you have any further questions or would like any additional information. 303-456-1223 or email me at Karyn@basementsdirect.com

Remember that to take advantage of the spring pre-registration special I need to have your membership information submitted to MOPS International by May 31st. That means there is not much time to get it back to me with your pre-registration fee so I can submit your info by that date, so act NOW! After May 31st, the registration fee will be \$25 plus applicable dues (see enclosed). Please pre-register as soon as possible to hold your spot, even if you cannot get it in before May 31st.

I look forward to meeting with you!

Better Moms Make a Better World!

In Christ,

Karyn Mitchell

Applewood Baptist Church



**Applewood Baptist Church MOPS
2008-2009 Registration Information**



Thank you for your interest in MOPS! We hope the following information will answer any general questions you may have about our group. This is our first year meeting and although we may start small and simple, we hope to grow as time goes on. As we grow, we hope to raise up new leaders for MOPS and provide more varied opportunities for learning and serving each other through teaching, speakers, fellowship and creative activities. If you have any additional specific questions, please contact our coordinator, Karyn Mitchell, (303) 456-1223. For more information on the MOPS international organization, visit the website www.mops.org.

Schedule:

ABC MOPS meets on the second and fourth Thursday each month from 9:00 – 11:30 am, beginning September and running through May. Our year is divided into 2 semesters, fall and spring. This fall, meetings will begin on September 11, 2008 with the last meeting December 11, 2008 (6 meetings total). Spring semester will begin on January 8, 2009 and will consist of 9 meetings running until May 14, 2009.

Moppets:

Our childcare program, MOPPETS, allows moms that much needed break away from children to enjoy adult conversation and fellowship. We frequently discuss topics that are not suitable for many children, such as romance and discipline. For those reasons we ask that only breastfeeding and lap babies less than 6 months old, stay with mom. We will have several rooms with age-appropriate activities to meet the needs of your children, while you attend MOPS. More information regarding MOPPETS will be provided at the first meeting.

Registration fees and payment schedules:

ABC MOPS is a chartered group of MOPS International. This obligates us to register each mom in our group for the MOPS Int'l membership. This membership includes the MomSense Magazine (\$20 value) and the theme book for the year (\$12.99 value) as well as a weekly Mom e-mail. For this membership we must collect \$25 per mom. This fee is in addition to the membership fees collected for each semester and is the same regardless of the time of year a mom registers. Your pre-registration fee includes this fee for early registration and to hold your spot for the coming year. Childcare is our biggest expense so fees are based on children you bring to participate in the MOPPETS program.

Fall Fees for 2008: (6 meetings)

Mom and NO children coming to ANY meetings: \$25 MOPS Int'l membership plus \$25 dues.

Mom and 1 or more participating child: \$25 MOPS Int'l membership plus \$65.

*Spring incentive pre-registration discount, \$20 through May 31st!

Spring 2009 fees: (9 meetings, fees subject to budget adjustments)

MOM and NO participating children: \$40

Mom and 1 or more participating children: \$85

Fees may be paid in full prior to the beginning of each semester or you may pay half of the total fee upon registration, with the second half payable at the first meeting of the semester. Registration will be processed on a first come first serve basis and will depend on available childcare space.

*Moms who join in the spring semester will be charged an ADDITIONAL \$25 fee for the MOPS Int'l registration. Moms who join partway through a semester will be registered on a space available basis and fees will be prorated (except the MOPS Int'l registration fee)

Registration:

Registration forms can be turned in at a MOPS meeting, at the Applewood Baptist Church office or mailed to the coordinator, Karyn Mitchell 7698 Quail St, Arvada, CO 80005. Checks should be made payable to Applewood Baptist Church, and noted for MOPS.

Refunds:

ABC MOPS is unable to refund any portion of the \$25 MOPS Int'l membership fee as it is paid directly to MOPS International. You will still receive the benefits of MOPS International membership.

Scholarships:

ABC MOPS wants to include every mother with preschoolers in our group. If you are in need of a partial or full financial scholarship, please know that we will work with you to meet your needs. Contact Karyn Mitchell (303-456-1223) or Heather Parr (303-888-1651) for information. Your circumstances will be discussed with confidentiality.

Visitors:

We would love to have moms visit our group and encourage members to bring visitors. Visitors may attend one meeting at no charge. However, we do ask that visiting moms call in advance to make sure we have room for your children in the MOPPETS program for that day, so that we can maintain the quality of care and proper ratios in each room. Contact Cheryl at 303-232-9575, ext. 16. (You will probably need to leave a message, so include your name and phone number and the ages of visiting children.)



MOPS International Registration Form

Welcome to MOPS! Please complete this form so we can learn some basic information about you.

Last Name First Name M.I.

Home Phone Alternate Phone

Address Apt #

City State Zip

Birthdate / / Anniversary date (if applicable) / /

Email

Have you attended a MOPS group before? Yes No

If yes, where?

Are you registered for MOPS International membership? Yes No

Do you attend a church? Yes No

If yes, where?

How did you hear about this MOPS group?

Please list your child(ren)'s names and birthdates.

Last Name	First Name	Birthdate

For MOPS Group use only

Date registration received

Discussion Group assigned

Date registered for MOPS International



MOPPETS Registration Form

Child's Last Name	First Name	M.I.
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Birthdate / /

Mother's Last Name	First Name	M.I.
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Home Phone	Alternate Phone
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Address	Apt #
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City <small>(If applicable)</small>	State	Zip
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Father's Last Name	First Name	M.I.
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Home Phone	Alternate Phone
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Who has permission to pick up your child(ren) in case of emergency?

Father - name:	Phone:
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Relative - name:	Phone
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Family Doctor:

Name:	Phone:
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Address:

Additional Emergency Contact:

Name:	Phone:
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Address:

Siblings (names and birthdates)

Favorite toys, songs, games, foods:

Special needs and instructions; allergies



MOPPETS Registration Form

Child's Last Name	First Name	M.I.
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Birthdate / /

Mother's Last Name	First Name	M.I.
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Home Phone	Alternate Phone
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Address	Apt #
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City <small>(If applicable)</small>	State	Zip
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Father's Last Name	First Name	M.I.
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Home Phone	Alternate Phone
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Who has permission to pick up your child(ren) in case of emergency?

Father - name:	Phone:
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Relative - name:	Phone
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Family Doctor:

Name:	Phone:
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Address:

Additional Emergency Contact:

Name:	Phone:
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Address:

Siblings (names and birthdates)

Favorite toys, songs, games, foods:

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