

Irvine Presbyterian Church Presents GENESIS: Rites of Passage



Tel: 949-215-7809

www.birdsnbeesconnection.com

For Parents & 6th Grade Daughters

A five-week interactive course that prepares tweens for adolescence by generating an open dialogue in a fun and engaging environment and helps them to understand that they're not alone on the journey to growing up.

This course gives parents the foundation and necessary tools to communicate their personal values and beliefs while supporting a Biblical perspective. It also creates a close bond between parent and tween that will last into the future.

"Rites of Passage" is taught by a certified Birds and Bees Connection Educator from our copyrighted guidebooks. Parents attend all sessions (mothers with daughters). For questions please contact Lauren Knips, Director of Children's Ministries at 949-786-9627 x206 or lauren@irvinepres.org.

Some of the topics in Rites of Passage include:

- Puberty
- Hygiene
- Menstruation
- Nutrition
- Reproduction
- Self esteem
- Hormones
- Social Media
- Peer Pressure
- Biblical Perspective

Date: Parent/Daughter	Location:	Host:
Parent Night (parents only Mandatory): Thursday, Jan 22 ~ 6:30-8:30pm Parent/Tween: Thursday Jan 29, Feb 5, 12, 19, & 26 ~ 6:00 – 8:30 pm	Irvine	IPC

Cost: \$180 (per couple) covers tuition, all course materials, and gift for mother and daughter. Tuition due on or before January 22 please make your check payable to IPC.

<p>Please mail your registration and payment or bring it by the church office during normal business hours. Last day to register is February 21. Space is limited to 15 couples.</p>	<p>Irvine Presbyterian Church c/o Lauren Knips 4445 Alton Parkway Irvine, CA 92604</p>
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We value your privacy. Information obtained from this registration form will never be sold or shared. This information will be used strictly for the use of the Birds & Bees Connection and Irvine Presbyterian Church.

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GENESIS: Rites of Passage (girls) ~ Please Print

Course First Date: 2/29/2015 Location: Irvine Presbyterian Church School _____

Parent's First and Last Name: _____

Child(ren) Attending Course: _____ Birth Date: _____ Grade: 6th grade

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Cell Phone: (_____) _____

Email: _____

Referred By: _____ Food Allergy: _____

Any Other Pertinent Information: _____