

Puber tea presented by Irvine Presbyterian Church



Tel: 949-954-0262

www.birdsnbeesconnection.com

For mothers & daughters in 4th & 5th Grades

An engaging 2½-hour course which covers the basic physical and emotional changes associated with the onset of puberty. Our course helps young girls feel more confident and prepared for menstruation with the foundation of a Biblical perspective that we are created by God in His image (Genesis 1: 27-31).

Puber-Tea creates a bond between mother and daughter, making the transition into adolescence much easier for both. Mother and daughter attend the class together as a couple, fostering enhanced communication regarding changes associated with puberty.

The class is interactive and fun and ensures both mother and daughter receive the same information. Mothers feel more comfortable and prepared for future conversations; daughters are given the tools they need to feel ready to move forward. *Class minimum 8 couples, max 15 couples.*

Some of the topics in Rites of Passage include:

- Puberty
- Hygiene
- Menstruation
- Self-Esteem
- Mother-Daughter Connection
- Physical & Emotional Changes
- Hormones

Date:	Location:	Host:
Tuesday, March 14 th 6pm to 8:30pm	Irvine	Irvine Presbyterian Church

Cost: \$70.00 (per mother-daughter couple) covers tuition, Guidebooks, refreshments, and gift.

Please mail your registration and payment or bring it by the church office during normal business hours.
Last day to register is March 7th.

Irvine Presbyterian Church
c/o Lauren Knips
4445 Alton Parkway
Irvine, CA 92604

A non-refundable administrative fee of \$25.00 will be applied to any cancellation of 48 hours or canceled check.

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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Puber-Tea ~ Please Print

Course Date: 3/14/17 Location/Host: Irvine Presbyterian / Irvine School: _____

Parent's First and Last Name: _____

Child(ren) Attending Course: _____ Birth Date: _____ Age/Grade: _____

Address: _____

City: _____ State: _____ Zip: _____

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

Email: _____

Referred By: _____ Food Allergy: _____

Any Other Pertinent Information: _____