



# One Community One Family

## Incredible Years Application

Date of Application: \_\_\_\_\_

### Applicant's Name:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

Zip Code

Email: \_\_\_\_\_ Ages of children: \_\_\_\_\_

### Referring individual or agency (if different than above):

Name of individual/agency: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

### Please check The Incredible Years program you are interested in:

- Parents and Babies Program, age 0-12 months and prenatal (8-10 weekly, 2-hour group sessions)
- Parents and Toddlers Program, ages 1-3 years (12-13 weekly, 2-hour group sessions)
- Parents and Preschool/Early Childhood, ages 3-6 years (14-16 weekly, 2-hour group sessions)

**Current groups are listed on the events tab of our Facebook page @OCOFIndiana. If you see a group that you would like to join, please list that here:** \_\_\_\_\_

*\*Participants may join a group at any time and can attend as many sessions as they choose. There is no obligation to complete the entire series, although it is encouraged.*

### Enrollment Consent (if individual being referred by an agency):

I authorize the content in this form to be provided to One Community One Family for enrollment purposes only.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of referring individual/agency: \_\_\_\_\_ Date: \_\_\_\_\_

**Please email completed application to [OCOF@onecommunityonefamily.org](mailto:OCOF@onecommunityonefamily.org) or submit information by phone.**

**For additional program information call One Community One Family at 1-877-967-OCOF (6263) or 812-932-1026**