



Please Mail or Fax Registrations to:  
Dave Mihoulides  
Augusta ATEAM Site Coordinator  
585 Howlandville Rd  
Warrenville, SC 29851.

Phone: 803-663-9063 Fax: 770-818-5815 Email: [ateamaugusta@familymatters-ga.com](mailto:ateamaugusta@familymatters-ga.com)

### ATEAM Registration Form

Teen's First Name: \_\_\_\_\_ Teen's Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Home Phone: \_\_\_ - \_\_\_ - \_\_\_ Parent's Work Phone: \_\_\_ - \_\_\_ - \_\_\_ Parent's Cell Phone: \_\_\_ - \_\_\_ - \_\_\_

Teen's Cell Phone: \_\_\_ - \_\_\_ - \_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ County of Residence: \_\_\_\_\_

What year was teen adopted? \_\_\_\_\_ Was teen adopted in Georgia? \_\_\_\_\_ Yes \_\_\_\_\_ No

What County: \_\_\_\_\_ Have you received any other post adoption support? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you currently receiving adoption assistance funding from the State of Georgia? \_\_\_\_\_ Yes \_\_\_\_\_ No

Emergency Contact (Must be someone other than parent): \_\_\_\_\_

Emergency Contact's Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Relationship to family: \_\_\_\_\_ Phone: \_\_\_ - \_\_\_ - \_\_\_ Cell Phone : \_\_\_ - \_\_\_ - \_\_\_

Please list your healthcare provider & policy number in case of emergency treatment:

Healthcare Provider: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Have you attended any Adopted Teen Empowerment & Mentoring (ATEAM) Programs before: \_\_\_\_\_ Yes \_\_\_\_\_ NO

What are your expectations for this program? \_\_\_\_\_

Describe any special needs, behaviors, and/or disabilities we should be aware of:

Please check the meeting dates that you are registering for: \_\_\_\_\_ May 21, 2011 \_\_\_\_\_ June 10-12, 2011

Parents Signature: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

Please visit [www.ateamgroup.org](http://www.ateamgroup.org) for more information or if you would like to be added or removed from our mailing list please contact:

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