

Parent-Child Mother Goose Program®
Programme la Mère l'Oie pour parents et enfants©

Thank you for your interest in joining the Parent-Child Mother Goose Program National Council. Please complete the following and submit to info@nationalpcmgp.ca

Name:

Address:

Email:

Phone number:

I or my organization is a member of National Council _____Yes _____No

What is your current connection to the Parent-Child Mother Goose Program®?

Why would you like to be a member of the Parent-Child Mother Goose Program® National Council (P-CMGP)?

What do you value about the P-CMG Program?

Being on the National Council means committing to participating on Council committees and contributing to council events. Which of the following might you be willing to participate in:

- **Fundraising** _____
- **Communications (Newsletters)** _____
- **Preparing/Delivering Connection Series** _____

What skills and capabilities do you bring to the National Council?

Is there anything else about yourself that you would like to let us know?

THANK YOU!