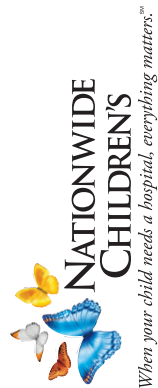




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When your child needs a hospital, everything matters.™

Nationwide Children's Hospital
ATTN: Community Education
700 Children's Drive
Columbus, OH 43205-2696

Community Education



Cleft Lip and Palate Education Programs

2015



**NATIONWIDE
CHILDREN'S**

When your child needs a hospital, everything matters.™

Time

10 a.m. – Noon

Class Location

Nationwide Children's Hospital Education Center
700 Children's Drive/Columbus, Ohio 43205

Fee

None. This program is free.

Confirmation

A confirmation e-mail will be sent to all participants who register one week before the program. After that time, no confirmation will be sent. If you do not have an e-mail address, we will land mail your confirmation two weeks before the program.

Cancellation

If you are unable to attend, please notify us as soon as possible at (614)-355-0662 or CommunityEducation@nationwidechildrens.org

Parking

Parking is available in the Visitor Garage at the corner of 18th St. and Mooberry. The fee is \$2 for the first four hours.

Cleft Lip and Palate Series

Self Esteem and Bullying

Saturday, March 14

This program will discuss how parents can help their child with a cleft lip/palate develop, maintain and foster positive self-esteem and self-concept.

Separate sessions are offered for parents and children. Session for children will offer the "It's Not Cool to be Cruel" anti-bullying program.

Second Surgeries

Saturday, May 9

This program will inform parents about potential second surgeries for the child with cleft lip/palate, when they occur, why they are needed and what to expect both pre and post-surgery.

A separate session will be offered for children with a fun activity.

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**For more information contact Nationwide
Children's Hospital Community Education at
(614) 355-0662.**
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Registration Form

2015 Cleft Lip and Palate Education Programs

Nationwide Children's Hospital Education Center

Name _____

☐ Adult ☐ Child Age _____

Name _____

☐ Adult ☐ Child Age _____

Name _____

☐ Adult ☐ Child Age _____

Address _____

County _____ State ____ Zip _____

Daytime phone (_____) _____

Email _____

School District _____

Children must be accompanied by an adult.

Please mark if you need:

☐ Wheelchair Seating ☐ Sign Language
Interpreter

Class selection (please mark):

☐ March 14 – Self Esteem
☐ May 9 – Second Surgeries

**Please mail this form to confirm
your space to:**

Community Education
Nationwide Children's Hospital
700 Children's Drive
Columbus, OH 43205

Or register online at:

NationwideChildrens.org/Edu

Click on the blue link:

["Click here for education programs"](#)