

VCS Community Change Project Domestic Violence Program for Men

A NY Model Batterer Program • www.nymbp.org

Phyllis B. Frank, Director • Karen Cancro, Project Coordinator
Vanessa Green, Jean Max Naissant, Supervisors • Joseph Coe, Diana Wilkins, Staff • Susanne Fitzpatrick, Admin Asst

Registration-Orientation Appointment Slip

Name: _____ Date: _____ Initials: _____

Address: _____
Street City State Zip

Phone/s: 1. _____ 2. _____
Best #(s) to reach you

Registrar: _____ Notified of Appt Notified of Interpreter (if needed)

Interpreter Needed in: _____ Interpreter: _____ Notified
(Language)

Registration Appointment: _____ Checklist
(mth/day/yr) (day) (time)

Registration Site:

- Broadway Manor, Yonkers Center for Recovery, Newburgh Westchester Probation, White Plains
 VCS, New City Finkelstein Library, Spring Valley RECAP, Middletown

Tell caller the following information and check each box indicating you have done so:

- Please know that you need to be on time. If you are more than 10 minutes late, the registration will not take place.
- Registration fee is \$40
- Checked file for additional fees. **If yes**, amount owed: \$ _____ Date/s of fees: _____
 To register you must bring: \$ _____ (reg fee + additional fees)
- Please bring your registration fee in exact amount in cash or money order. Registrar cannot make change.
- Please bring paperwork that can be left with staff to confirm income, such as:
- A current pay stub or W2 form or a letter from employer showing your hourly wage
 - Unemployment/ Public Assistance Verification
 - If you have a Public Defender, Legal Aid or 18B attorney, a copy of the referral form.
 - ONLY for those who do not have above documentation. A letter about your financial status which must include the name, address and phone number of writer and their relationship to you. The letter must not be from you or a current or former partner. This letter may be verified by a call to the writer.

Please note that without paperwork your fee will be \$80.

- Please know that if you are late, do not have your total registration fee, or fail to attend this appointment, you will be charged an additional \$15 when you register. To avoid additional charges, you must call to cancel *no later than 3:00 pm* for an evening appt or *2 hours prior* for daytime appt on the day of your appt.

Length of order: 26 session 52 session

Reason Registration did not take place: No show No \$ Late

Office Use: Checklist
 Appt Book
 Timesheets

Additional Comments: _____

Call in Instructions if Registration Did Not Take Place

Say: 1. Referred Person's Name 2. Reason registration did not take place 3. Additional comments (if applicable)

08/09