



Dear Parents and Siblings,

We look forward to meeting you when you join us for our Parent and Sibling Programs. We know that family members often arrive at Hazelden with some level of fear and anxiety. Many experience feelings of guilt in regard to their family member's addiction and are fearful of being judged by others. At Hazelden, we view addiction as a "no-fault" disease and offer you a safe and comfortable place to receive support and education. Our programs for Parents and Siblings will also provide you with the opportunity to share your experience, strength and hope with other parents and siblings.

The Parent Program is offered weekly and the Sibling Program every three weeks. Both programs begin Sunday afternoon at 1:00 p.m. and conclude Wednesday at 7:30 p.m. Typically parents attend the Parent Program the third or fourth week of their child's treatment, unless they have a son and/or daughter participating in our Sibling Program. Out of respect for other program participants, and because each part of the program builds on previous segments, **it is expected that participants commit to the entire program** and make travel arrangements accordingly.

Parents will be contacted by their child's counselor during the first week of treatment to register for the Parent Program, and to discuss whether the Sibling Program is a good fit for the other children. We have enclosed more detailed information on these programs in this packet and encourage you to read the material carefully. **Please do not make airline reservations until after you register for the program with a counselor.**

After you have confirmed your participation dates with your child's counselor, please return the enclosed registration form by FAX (763-559-0149) or by mail in the enclosed envelope. The Parent Program is offered at no cost to two primary caregivers of each patient. If parents are separated or divorced, we expect they attend the program separate weeks. The cost for additional parents/ caregivers who attend is \$622.00 per person. We are fortunate to be able to offer the Sibling Program free of charge due to the generous financial support of donors.

An area map with hotel information is also included. Please choose the accommodations that best meet your needs. We recommend making hotel reservations well in advance.

Also please note that Hazelden's Center for Youth and Families is a tobacco free campus. Tobacco products (smoking or chewing) may not be used on campus by patients, parents, visitors, employees and volunteers. For more information, see the enclosed Parent and Sibling Program Fact Sheets.

Lastly, information and registration materials can be downloaded at [www.hazelden.org/parents](http://www.hazelden.org/parents) and [www.hazelden.org/siblings](http://www.hazelden.org/siblings). Should you need to contact us regarding the Parent Program or Sibling Program at any time, please call 800-833-4497 and ask to speak with a Parent Program staff member.

Sincerely,

Carole McNeill, MA, LADC  
Parent Program Supervisor



# Parent Program Registration

Dates of Participation in Parent Program: \_\_\_\_\_

Your Name(s): \_\_\_\_\_

Your Birth date(s): \_\_\_\_\_

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

Street

City

State

Zip

Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Where will you be staying? \_\_\_\_\_ Phone: \_\_\_\_\_

### If applicable:

Patient's first name: \_\_\_\_\_ First letter ONLY of last name: \_\_\_\_\_ Age: \_\_\_\_\_

Your Relationship(s) to Patient: \_\_\_\_\_

### Emergency Contact:

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

### Please mail or fax to:

Hazelden's Center for Youth and Families  
Attention: Parent Program Staff  
11505 36<sup>th</sup> Avenue North  
Plymouth, MN 55441-2398  
FAX: 763-559-0149

The program is offered at no cost to two primary caregivers of each patient. Payment of \$622 for each additional parent/caregiver will be collected on Monday, or you may enclose a check with this form.