

Visit our website at NationwideChildrens.org/Edu for details on all of Nationwide Children's Hospital Community Education classes.



When your child needs a hospital, everything matters.

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



Active Parenting 2025



W1018011 (9/23)

Active Parenting

Active Parenting:

Six week program for parents of children ages 5-12.

Topics include:

- The Ins and Outs of Daily Living
- Promoting Courage and Self-Esteem
- Understanding How Your Child Thinks
- Making Responsibility a Reality
- Cooperative Kids
- Solving Problems Together

Program Dates/Time

Classes are held on Tuesday evenings from 6 - 8 p.m. for six weeks. The date listed is the date of the first class.

• April 22

• September 23

1234 Parents!

Four week program for parents of children ages 1-4.

Topics include:

- Child Development
- Bonding and Home Activities
- Discipline
- Injury Prevention
- Making Good Choices
- Encouragement and Taking Care of Yourself!

Program Dates/Time

Classes are held on Tuesday evenings from 6 - 8 p.m. for four weeks on our main campus. The date listed is the date of the first class.

- February 25
- July 22

Location

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

Cost

\$40 per person \$65 per couple

Registration Fee Includes

Course book, instruction, additional class materials and certificate of completion. Child care is not provided. Couples registration receives one course book. Additional books are \$15.

Cancellations

Cancellations are accepted until two weeks before the program. Refunds will be made minus 30% for administrative costs. After this time, no refunds will be given. Registration fee will not be transferred to future programs for those absent or canceling.

Confirmation

A confirmation email with directions to the class will be sent to all participants.

Questions

Call Community Education (614) 355-0662.



Active Parenting

2025 Registration Form

Parent/Caregiver Name			
Parent/Caregiver Name			
Address			
City State Zip			
Daytime phone			
Fax			
Email			
School District			
Please mark if you need: Wheelchair seating Sign language interpreter 			
Class Selection: (please mark selections)			
Active Parenting1 2 3 4 Parents!QApril 22Image: February 25QSeptember 23Image: July 22			
Program Fee			

□ \$15 each additional course book

Payment: Cash Check

\Box Visa $\ \Box$ MasterCard $\ \Box$ American Express $\ \Box$ Discover

Credit Card #		
Name on Card		
Billing Address		
City	State	Zip
	Amount enclosed: \$	

Please enclose a check made payable to Nationwide Children's Hospital and mail with this form to:

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

or register online at NationwideChildrens.org/Edu

Send me information on:

Other programs of interest for Active Parenting families.

□ First Steps: Infant Care