

## **Child Family Health International**

995 Market Street, Suite 1104  
San Francisco, CA 94103  
United States of America  
Phone: 415.957.9000  
Fax: 415.840.0486

If you'd like to participate in a program for 5, 6 or 7 weeks, please follow the instructions below:

1. Go to [www.cfhi.org](http://www.cfhi.org)
2. Select a program. Along the right hand side of the page, click on '**Apply Now**', above '**Introduction**'
3. Complete the personal information requested on the application. Click on '**Submit**'
4. Pick the appropriate program date from the drop down menu, make sure you pick the **8 week option**.
5. Once you are accepted to the program, please give us a call or email us to let us know whether you'd like to participate for 5, 6 or 7 weeks. We will adjust your program fee to reflect the number of weeks you wish to participate.

**Please contact us directly at 415-957-9000 x. 301 or x. 305 with any questions.**

Sincerely,  
CFHI Staff  
Child Family Health International