

**2017 - 2018 First Quarter
August / September 2017
Professional Development Workshops
REGISTRATION FORM**

Name: _____

Mailing Address: _____

Phone Number: _____
Home
Work

Child Care Facility: _____

Race / Ethnicity: African-American Asian Caucasian Hispanic / Latino
Multi-Racial Native American Other Prefer not to give

Primary Language Spoken: English Spanish Other_____

Participant Age: 15-19 20-24 25-34 35-44 45-54
55-59 60-64 65 and over Prefer not to give

Job Title: Director Asst. Director FCCH Provider Child Care Teacher
Program/SA Site Coordinator SA Group Leader/SA Program Manager
Asst. Teacher/Aide/Floater/Substitute Parent Other_____

Children Served by Age Group: Birth - Three (0-35 mos) Three - Five (36 mos-Kindergarten)
Five and Older

Number of children in your care: _____

___TH, August 24, 2017	What's In Your Teaching Toolkit?	(6:00 p.m. – 8:00 p.m.)	\$5.00
___WED, September 6, 2017	Director's Forum? PLC	(11:30 a.m. – 1:30 p.m.)	\$5.00
___TU, September 12, 2017	Preventing Power Struggles	(6:00 p.m. – 8:00 p.m.)	\$5.00
___TH, September 21, 2017	What Babies Need to Learn & Grow	(6:30 p.m. – 8:30 p.m.)	\$5.00
Total Amount Paid:			\$ _____

Please register as soon as possible for only the classes you plan to attend. **Registration is not complete until payment is received! Fees for the classes are nonrefundable.** If you have registered for a class and are no longer able to attend please contact Brandy Odom at 576-0112 or bodom@brighterfutures.org

Send checks, made payable to MCPC, with registration form to:

**Montgomery County Partnership for Children
404 North Main Street, Troy, NC 27371
Attention: Brandy Odom**

