



**Region 5 Early Care and Education Professionals'
Winter Conference
Saturday, December 2, 2017
Conference Location: Robeson Community College (Building #8)**

***Register Online at www.ccpfc.org
or**

Mail form and payment to:
Partnership for Children of Cumberland County
351 Wagoner Drive, Suite 200
Fayetteville, NC 28303

***Make check or money order payable to CCPFC**
Phone: 910-860-2277, ext. 2528 or 2537
www.ccpfc.org

Registration Form With Payment Must Be Received No Later Than: November 22, 2017

*** One form per participant; all questions must be completed***

Participant Name: _____ **Last 4 digits of SSN#:** _____ **Gender:** ☐Female ☐Male

Participant Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Home/Cell Phone #: (____) _____ **Work Phone #:** (____) _____ **E-mail Address:** _____

Employment Facility: _____ **County of Employment:** _____

Type of Facility: ☐ Center ☐ Family Child Care Home (FCCH) ☐ Unlicensed/Legally Exempt Program ☐ N/A

Current Education Level: ☐ HS Diploma ☐ HS Diploma/Some College ☐ 2 Year Degree ☐ 4 Year Degree or higher

Ethnicity: ☐ African American ☐ Asian ☐ Caucasian ☐ Hispanic/Latino ☐ Multi-Racial ☐ Native American

☐ Other ☐ Prefer Not **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

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 _____

Please enter the number of children in your care by age group. If none enter 0:

☐ birth – three (0-36 mos) _____ ☐ Three-Five (36 mos-Kindergarten) _____ ☐ Five –Older (5 – 12) _____

*****Please create a 8 character login ID and 8 character Password. (keep for your records for future registration)*****

Login ID: _____

Password: _____ (must include one letter and one number):

Name of Learning Event	Time

In accordance with NC G.S. 25-3-506, a processing fee of \$25.00 will be collected on all returned checks!

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