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Child Care Connections Training Registration Form

**** Registrations are NOT accepted over the phone. To avoid a delay, please fill in form completely. ****

To register for a training, please fill out this form and mail it with the registration fee to:

Child Care Connections, 136 U.S. Route One, Scarborough, ME 04074

If you have questions, please call Margaret Cushing at 396-6575 or e-mail mcushing@smaaa.org.

Name: _____ Birth Date: _____ / _____ / _____

Home Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____ E-mail: _____

Are you a member of the Maine Roads to Quality Registry? YES NO

Are you working toward your: CDA Degree (what degree: _____) Accreditation

WHERE YOU WORK:
 Name of Program: _____

Center Family Child Care Head Start Nursery School In-Home License Exempt Other

Years of experience working in child care: Less than 1 year 1-2 years 2-5 years
 5-10 years 10+ years

Your Position: Owner Center Director Head Teacher Teacher Assistant Teacher
 Teacher Aide Substitute Other: _____

Age Group(s) of children you work with: Infants Toddlers Preschool School Age

FALL 2008 TRAINING SCHEDULE (please check all trainings you wish to attend):

<u>Title of Training</u>	<u>Dates</u>	<u>Location</u>	<u>Time</u>	<u>Fee</u>
Caring for Infants, Toddlers, and Their Families	Sept. 18 – Nov. 20	Portland	6:00 – 9:00	___ \$15
Introduction to Infant Mental Health	Sept. 19 & 20, Oct. 4	Scarborough	8:30 – 3:00	___ \$15
Maine’s ECLG	Sept. 24 – Nov. 12	Scarborough	6:00 – 9:00	___ \$15
Operating a Family Child Care Business	Sept. 29 – Nov. 17	ONLINE		___ \$15
Maine’s ECLG	Oct. 6 – Dec. 1	Bath	6:00 – 9:00	___ \$15
Supporting Maine’s Infants and Toddlers	Oct. 14 – Dec. 9	Freeport	6:00 – 9:00	___ \$15
Bagels & Business (CENTER DIRECTORS)	Sept. 24, Oct. 15, Nov. 19	Scarborough	8:30 – 10:30	___ \$5/session

Registration is on a first-come, first-serve basis and class size is limited.

These dates, locations, and times are subject to change. Once your registration form and fee have been received, we will send you a confirmation letter with detailed dates, times, and locations (with directions).

Please send registration form and fee to the address at the top of this page.

PLEASE TURN PAGE OVER TO REGISTER ADDITIONAL STAFF

This form may be copied if necessary.

CCC FAX: 396-6581

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Trainings Requested: _____

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