



REGISTRATION FORM
Registration ends Tuesday, March 19, 2019

Complete one form for each participant registering. You may duplicate form. Please print clearly.

Name of Participant _____

Center, Family Home, or Agency's Name _____

Center's Mailing Address _____

City _____ State _____ Zip _____ Center's Telephone _____

Your E-mail Address _____

Position/Title/Age Level _____

Teachers -how many children are in your classroom? _____

Directors, Asst. Directors, Owners, and Floaters, how many children are in the entire childcare facility? _____

Registration Fee \$25.00 (Cash or Check)

Make Checks Payable to: York County First Steps - Registration fee is Non-Refundable (We cannot accept debit/credit cards.)

PLEASE NOTE: After attending the opening session, keynote address, and the two workshop sessions, each participant will receive 5 (five) certified DSS credit workshop hours.

PLEASE NOTE: Classes are limited; if all of your selections are filled alternative classes will be given. Every effort will be made to put you in your first two choices; however, classes are limited to 30 participants. There are two sessions, please list six different choices to help us give you at least two of your selections. (Please put workshop # from workshop selection list)

Saturday, March 23, 2019 1st _____ 2nd _____ 3rd _____
4th _____ 5th _____ 6th _____

Continental Breakfast and lunch will be provided

Lunch Selections (please choose one):

- Turkey Sandwich, Vegetable Sandwich, Ham Sandwich, Chef Salad, Chicken Salad Sandwich, Garden Salad

T-Shirt Size: () Small () Medium () Large () XL () XXL () XXXL