

### Training Registration Form

Instructions: Please photocopy this form and keep the original for future use. Only registered participants will be allowed to attend trainings. Enter the number of staff persons who will attend the training in the appropriate column, and then enter their names on the next line. Multiply the number of persons by the fee and enter the total to the right.

Training	Date	Number of persons to attend	Fee	Total
Head Lice	1/23/18		<b>\$5.00</b>	
<b>Names:</b>				
Creating A World of Learning	2/6 & 2/7		<b>\$25.00</b>	
<b>Names:</b>				
ITS-SIDS	2/12/18		<b>\$5.00</b>	
<b>Names:</b>				
Medications in Child Care	2/20/18		<b>\$5.00</b>	
<b>Names:</b>				
Childhood Lead Poisoning	3/20/18		<b>\$5.00</b>	
<b>Names:</b>				

Note: Registration is only valid if cash or a check payable to Richmond County Partnership for Children (RCPC) is attached. Forms and payments may be delivered to the CCA office or mailed to PO Box 1944, Rockingham, NC 28380. Registration is due by the register by date noted for the training. Refunds will only be given if the training is cancelled. Thanks!