

# Summer 2016 Class Registration Form

## Provider Information

Classes fill up very quickly, so register early!

PARTICIPANT'S FIRST NAME	PARTICIPANT'S LAST NAME
HOME PHONE	WORK PHONE
DATE OF BIRTH (MM/DD/YYYY)	
EMAIL	
ADDRESS	
CITY	STATE      ZIP

Which are you?     Licensed Provider       Pursuing License  
 Program Staff                       Exempt  
 Other \_\_\_\_\_

**Submission Methods:**

**Email:** [crr@caowash.org](mailto:crr@caowash.org)

**Fax:** 971-223-6101

**Mail or in Person:**

**CCR&R:** Community Action  
 1001 SW Baseline Street • Hillsboro, OR 97123

## Workshop Policies

**By registering for a workshop/training with our agency you agree to our registration, attendance and cancellation policies. It is the attendee's responsibility to know the location, directions, date/time of the workshop.**

**To register for a workshop, you must:**

1. Complete the registration form. Please use one form per person.
2. Mail, fax 971-223-6101, email ([crr@caowash.org](mailto:crr@caowash.org)) or bring in your form with full payment. We must receive your registration at least 3 days in advance of the class date to allow for processing.
3. When we receive your registration and payment, we will confirm your classes by email.

**Attendance Policies**

To receive a training certificate, participants need to arrive on time and stay for the entire workshop. Participants arriving 15 minutes after the advertised start time will not be admitted. If workshop is cancelled by CCR&R Training Bucks will be given since **refunds are not possible**.

Let us know if you can not attend. Participants only receive training bucks if CCR&R receives cancellation notice **3 days ahead** of the scheduled training.

CCR&R child care trainings are not held when local schools districts close due to inclement weather. School closures are announced on CCR&R's recorded message.

**Refunds are not possible.**  
**Children are not permitted in classes.**

## Workshop Information

Washington County											
Overviews				Safety Sets							
50674	FREE			50678	\$10			50679	\$45		
50675	FREE			50680	\$10			50681	\$45		
50676	FREE			50682	\$10			50683	\$45		
Childhood Development and Program Workshops											
50660	\$15			50662	\$84			50663	\$15		
50664	\$24			50665	\$15			50666	\$13		
50667	\$42			50668	\$24			50669	\$60		
50670	\$28			50671	\$42			50672	FREE		
50673	\$42										
Columbia County											
Overviews				Safety Sets							
50850	FREE			50851	\$45			50852	\$10		
Childhood Development and Program Workshops											
50847	FREE			50844	\$48			51032	\$42		
50845	\$28			50846	\$42						
Food Handlers											
Food Handlers	\$10										
IQT Washington County					IQT Columbia County						
50937	FREE										

Total # of Workshops: \_\_\_\_\_ Total Fees: \_\_\_\_\_

Payment Type:     Cash     Check     Card     Training Bucks

### Make checks payable to *Community Action*

**To pay by card, complete the following information**

Name: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Vcode: \_\_\_\_\_ Expiration: \_\_\_\_\_  
 Total amount to be charged to Credit Card: \_\_\_\_\_

Office Use Only	Received By	Date	Fiscal	Confirmation