

# Spring 2017 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.**

**Nursing infants are the only children permitted in class.**

## Workshop Information

Washington County									
Overviews				Safety Sets					
53011	FREE			53029	\$10			53030	\$45
53012	FREE			53031	\$10			53032	\$45
53013	FREE			53033	\$10			53034	\$45
Childhood Development and Program Workshops									
53118	\$60			53962	FREE			53961	FREE
54109	\$35			54094	\$28			54127	\$42
54084	\$28			54129	\$42			54138	\$42
52994	\$70			54227	FREE				
Online Trainings									
54139	\$150			54140	\$42			54215	\$42
Columbia County									
Overviews				Safety Sets					
54121	FREE			54123	\$45			54124	\$10
54122	FREE								
Childhood Development and Program Workshops									
54113	\$70			54114	\$24			54115	\$24
54116	\$15			54117	FREE			54118	\$84
Food Handlers									
Food Handlers	\$10								

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

Payment Type:  Cash  Check  Card  Training Bucks

**Make checks payable to *Community Action*:  
 If paying by check, individual or facility name:**

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

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

Office Use Only	Received By	Date	Fiscal	Confirmation