REGISTRATION FORM

Western Arkansas Child Care Conference and Provider Appreciation Day

Building a Strong Foundation for Arkansas Children

April 19, 2008

University of Arkansas – Echols Building / Fort Smith AR

Please submit a separate registration form for each person. Feel free to duplicate this form for colleagues

Name _____ Title _____
Home/Agency/Center/School _____
Address _____
City _____ State _____ Zip _____
Day Phone: _____ Evening Phone: _____
Fax: _____ Email: _____

Pre-Registration ---------- $10.00

Continuing Education Units (Optional) ---------- no fee

CEU are offered by University of Arkansas Fort Smith Free by attending the entire conference 0.6

On-Site Registration Fee ---------- $15.00

Total Due ---------- $_____

Make checks payable to: NWA Child Care Resource and Referral Center

Purchase order #_____ is enclosed. (Purchase order or check must accompany registration.)

Special Needs: I prefer Vegetarian Meals I am disabled/need special accomodations

My primary areas of interest at this conference are (use 1 through 3 to indicate choice):

_ Infant _ Toddler _ Pre-School _ Special Needs _ School Age _ Other _ DHS

_ Centers _Home-based _ School _ Provider Training _ Administration _Parenting

(This information is being collected for room scheduling only. Seating will be based on availability - arrive early.)

Mail Registration to: **NWACCR&R Center** **(479) 751-3463**
614 E. Emma Ave., #107 **(479) 751-6166**
Springdale, AR 72764 **Fax (479) 751-1110**

Please Note: The University of Arkansas is a drug, alcohol and tobacco free campus. **Attire:** We encourage you to dress casual and to wear comfortable shoes. We suggest you may want to dress in layers as the air conditioning is sometimes quite cool.