Penn State **Extension**

2012 Fall Better Kid Care Registration Form

Adams, Cumberland, Franklin

✓	CBK-CODE	COUNTY | Class Description	DATE / TIME	COST
	K4 C1 41	**Adams** – Obs. Level I The Objective of Objective Observations	09/18/12 - 6:00-8:00 PM	$10.00
	K4 C2 41	**Adams** – Obs. Level II Using Observations to Develop Strategies to Improve Behaviors	09/25/12 - 6:00-9:00 PM	$15.00
	K7 C1 84	**Adams** – Stress Less – Tips & Tools for Managing Stress	09/27/12 - 6:00-8:00 PM	$10.00
	K1 C1 04	**Adams** – Yoga Within the Classroom; Bringing Unity to the Body & Mind	10/18/12 - 6:00-9:00 PM	$15.00
	K7 C1 81	**Adams** – IMIL - Reversing Current Obesity Trends	10/23/12 - 6:00-9:00 PM	$15.00
	K1 C2 04	**Adams** – Physical Development and Learning	10/30/12 - 6:00-9:00 PM	$15.00
	K2 C2 21	**Adams** – Avoid Behavior Problems – Teach Self Control	11/15/12 - 6:00-8:00 PM	$10.00
	K4 C2 42	**Adams** – Intentional Teaching; Use your Knowledge, Judgment and Expertise to Organize Learning Experiences for Children	11/27/12 - 6:00-9:00 PM	$15.00
	K2 C2 13	**Adams** – Developing Standards through Health and Physical Education	12/13/12 - 6:00-9:00 PM	$15.00
	K2 C2 19	**Adams** – Developing Standards Through Creative Expression	12/20/12 - 6:00-9:00 PM	$15.00
	K6 C1 62	**Cumberland** – Professionalism in Early Childhood	09/04/12 - 6:00-9:00 PM	$15.00
	K7 C1 84	**Cumberland** – Head Bumps Matter	09/12/12 - 6:00-8:30 PM	$15.00
	D8 C3 95	**Cumberland** – Business Acumen for Early Learning Programs Part 1	10/09/12 - 5:00-9:00 PM	$20.00
	K3 C2 32	**Cumberland** – Edutainment	10/17/12 - 6:00-9:00 PM	$15.00
	D8 C3 95	**Cumberland** – Business Acumen for Early Learning Programs Part 2	10/23/12 - 5:00-9:00 PM	$20.00
	K4 C2 41	**Cumberland** – Effectively Building and Using Portfolios for Assessment in Early Childhood	10/25/12 - 6:00-9:00 PM	$15.00
	K2 C2 13	**Cumberland** – Integrating the Early Learning Standards into Curriculum and Assessment Part 1	11/10/12 - 8 AM-2:30 PM	$30.00
	D8 C3 95	**Cumberland** – Business Acumen for Early Learning Programs Part 3	11/13/12 - 5:00-9:00 PM	$20.00
	K4 C2 41	**Cumberland** – Using Observation to Support Individual Children's Development	11/19/12 - 6:30-8:30 PM	$10.00
	K2 C2 14	**Cumberland** – Early Literacy Development	12/19/12 - 6:00-9:00 PM	$15.00
	K4 C1 41	**Franklin** – The Basics of Observation	09/13/12 - 6:30-8:30 PM	$10.00
	K3 C2 32	**Franklin** – Checking the "Cultural" Pulse of your Program; Edutainment Part 1	09/17/12 - 6:00-9:00 PM	$15.00
	K7 C1 84	**Franklin** – Head Bumps Matter	09/26/12 - 6:00-8:30 PM	$15.00
	K3 C2 31	**Franklin** – Checking the "Cultural" Pulse of your Program Anti Bias Education Part 2	10/01/12 - 6:00-9:00 PM	$15.00
	K8 C2 91	**Franklin** – Family Child Care Home Providers Round Table-Fall Session	10/10/12 - 6:00-9:00 PM	$15.00
	K8 C2 96	**Franklin** – Checking the "Cultural" Pulse of your Program Cultural Competency Part 3	10/29/12 - 6:00-9:00 PM	$15.00
	K2 C2 11	**Franklin** – The Outdoor Environment, it's a Learning Environment Too!	11/05/12 - 6:30-8:30 PM	$10.00
	$	← TOTAL WORKSHOPS CHECKED @ $10		
	$	← TOTAL WORKSHOPS CHECKED @ $15		
	$	← TOTAL WORKSHOPS CHECKED @ $20		

We look forward to seeing you. If you have any questions, please contact:

> **All Registrations** - Erin Goodling, Lebanon Extension (eyg5039@ag.psu.edu) at 717-270-4391 **OR**

> **For General Questions Concerning BKC** - Cynthia Pollich, Lancaster Extension (cep5@psu.edu) at 717-394-6851.

Please Note:

- **Payment** must be received in order for your **registration** to be complete.
- No refunds will be given but vouchers can be issued.
- Act 48 and CEU's granted at no additional charge.

Please see reverse side to continue registration & payment information. →

INSTRUCTIONS: Please complete **ALL** the information on this registration form and return along with your *payment* one week prior of the professional development class to:

Penn State Extension
Professional Development
2120 Cornwall Road, Suite 1
Lebanon, PA 17042

Payment must be received in order for your **registration** to be complete.

Payment Type | Information:
(Please Print Clearly)

$ 10.00	X	_____Total # Workshops Enrolled	= $	_____.00
$ 15.00	X	_____Total # Workshops Enrolled	= $	_____.00
$ 20.00	X	_____Total # Workshops Enrolled	= $	_____.00
		Total	$	_____.00

☐ **Check enclosed payable to:** PSCE Program Fund

By Credit Card: ☐ **VISA** ☐ **MasterCard**

Credit Card Number: _ _ _ _ - _ _ _ _ - _ _ _ _ - _ _ _ _

Expiration Date (*month/year*): _____|_____

Name on Credit Card: _____

Phone Number: ( ) _____

Street Address on Credit Card: _____

Email of Cardholder:

_____@_____._____

City, State, & Zip: _____

Signature of Cardholder: _____

Participant Information:
(Please Print Clearly)

Name: _____
First Name Middle Initial Last Name

Email: _____@_____

Address: _____

County: _____

Phone: ( ) _____ (Home) ( ) _____ (Work)

Place of Employment: _____

Address: _____

Social Security Number (*Last 5 digits Required*):

X	X	X	-	X		-				

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