



**Child Care Center Registration Form**  
 Alamance Partnership for Children  
 Child Care Resource and Referral  
 (One form per training)

Center Name: \_\_\_\_\_ Director Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of workshop: \_\_\_\_\_ Name of workshop: \_\_\_\_\_

Classroom/Age Group	Name of Training Participant	Cost of Workshop

Total Amount Enclosed: \$ \_\_\_\_\_

**Make checks payable to:**

Alamance Partnership for Children

**Mail registration to:**

Alamance Partnership for Children  
 2322 River Road  
 Burlington, NC 27217

(or)

**Pay in person at:**

Alamance Partnership for Children  
 2322 River Road  
 Burlington, NC 27217  
 Telephone: (336) 513-0063

- The Partnership is not responsible for registration forms or fees lost in the mail or not delivered on time. *Registration forms must be completed and received with payment at least **one week** prior to the training date.*
- Space for training is limited! You can register no more than 4-5 people from the same child care facility.
- If the Alamance County Health Department is listed as the location of the training you must contact their office to register and pay for any trainings held at the Health Department. The contact number should be listed also.
- **Payment will NOT be accepted at the workshop.**
- We do not refund money for unattended trainings.