



# EXPLORATION and DISCOVERY 2019

Saturday, October 19, 2019

## Registration Form

Name: \_\_\_\_\_

Child Care/Program Name (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_ City/Town: \_\_\_\_\_

Email: \_\_\_\_\_

### **WORKSHOP SELECTION**

Please identify your workshop selection in each set by marking 'A' beside your first choice and 'B' beside your second choice.

#### **MORNING SET 10:30 - 12:30**

1-1	Schema Theory & the Relationship with Children's Learning Behaviour
1-2	Secure and Calm
1-3	Beautiful Stuff from Nature - Learning with Found Materials
1-4	Rethinking Weapon Play: an Example of Reflective Practice

#### **AFTERNOON SET 1:30 – 3:30**

2-1	Diversity Circle Time – Creating a Safe Space to Explore Differences
2-2	Story Baskets
2-3	When Children Erupt: Helping Yourself Stay Steady in Tough Situations
2-4	Climate Change: Looking at Ways to Support Early Childhood Curriculum Through Indigenous Teachings

Fee: \$ 50.00 (No charge for Sunshine Coast ECE students—contact the CCRR for details.)

Payment can be made by cheque or cash in person at the Child Care Resource and Referral Program office in Sechelt at 5520 Trail Avenue. 604-885-5657.

Or you can mail a cheque along with a registration form to: CCRR, Box 74 Sechelt, BC V0N 3A0.

If you wish to pay by eTransfer, please contact us for further details.

**Deadline for mailing your registration is October 4. Deadline for refunds is also October 4.**

Cheques can be made out to Sunshine Coast Community Services Society (SCCSS).

**Conference Packages to be handed out at conference sign-in on October 20.**

Photographs will be taken during the Exploration and Discovery conference. By registering, you will be giving permission that photos containing your image/likeness may be used. Remember, if you have dietary restrictions, you are responsible for bringing your own food. Remember to bring your own container for water—you can fill it at the filling station.

**For CCRR Use Only:** Date \_\_\_\_\_ Received by mail \_\_\_\_\_ Received by person \_\_\_\_\_ Received by phone \_\_\_\_\_

Amount Paid \_\_\_\_\_ Payment Method \_\_\_\_\_ Receipt # (if applicable): \_\_\_\_\_

Name on Cheque \_\_\_\_\_ Notes \_\_\_\_\_

CCRR staff person receiving the registration form: \_\_\_\_\_