

RSVP For Foster Parents



Name: _____
(Person Attending Training)

Contact Numbers: _____
(Cell, home, work, etc.)

Send Original Certificate To: _____
(Person, address to send certificate)

Send Copy To: _____
(Person, address to send certificate)

I would like to attend _____
(Name of the training) Please complete a separate RSVP for each training.

Day: _____

Time: _____

Location: _____

- When attending CPR or BPS trainings, please wear comfortable, loose fitting clothing, no long dangling jewelry and please do not wear lipstick or lip balms during the trainings.
- Do not bring children or people you support to the training.

Office Use Only: Confirmation of Training

___ You are confirmed to attend the training on the date and time indicated above.

___ The training you have selected is full.. Please select another date and time.

- **Important: Please come to the training on time. You will not be admitted into the training if you arrive late.**
- If you RSVP to training with less than one week's notice, we cannot guarantee that you will receive a confirmation or be notified of cancellation or changes in the location of the training.

How to register: Email or Fax

Michelle Ashford Ext. 370 (mashford@arcncr.org)

The Arc Northern Chesapeake Region, 4513 Philadelphia Road, Aberdeen, Maryland 21001

Phone: 410-836-7177 or 410-879-6785, Fax: 410-893-3909, www.arcncr.org

Please Note: In the event of inclement weather or other possible emergencies that may result in the cancellation of scheduled trainings, please call The Arc's Administrative Office 410-836-7177 for announcements regarding cancellations and closures.