



Confirmation form

Complete and fax to Micquelyn Jones 390-7373

Name of Center: _____

Name of Contact person (site liaison): _____

Phone _____ ext _____ Fax _____

Email: _____

Address (where workshop will be held) _____

City _____ State _____ Zip _____

Parking _____

Workshops are 45 minutes each. (Please allow one hour per session for set up and preparation).

Select workshop	Date	Time	# Expected
<input type="checkbox"/> Learning on the Go			
<input type="checkbox"/> Playing the Games			
<input type="checkbox"/> Dads are Different (everyday activities for dads)			
<input type="checkbox"/> Ages & Stages			
<input type="checkbox"/> Effective Discipline			
<input type="checkbox"/> Fun with Food & Fitness			
<input type="checkbox"/> Effective Communication			

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If you require additional information contact Micquelyn Jones (904) 390-3277/micquelynj@uwnefl.org