



Child Care: A Work of Heart

C-NET Spring Training – 2017

Director's Name:		Phone:
Center Name:	Email:	
Address:		
City:	State:	Zip:

Check session you will be attending:

(Please use separate forms if attending multiple training sessions.)

___ **March 25 — Charleston** (Please register no later than March 17, 2017)

___ **May 13 — Charleston** (Please register no later than May 5, 2017)

Number attending	_____	X	\$50.00 *	=	_____
C-Net Members attending	_____	X	\$35.00 *	=	_____
Darkness to Light (material fee)	_____	X	\$10.00	=	_____
TOTAL FEES					_____

*Late registration fee is \$55.00/person.

***C-Net** member late registration fee is \$40.00/person.

Check # _____ (enclosed) or

Credit Card # _____ Exp. Date _____

Name on Card (print) _____

Please print or type names of those attending.
Use back of this sheet if necessary.

_____	_____
_____	_____
_____	_____

Return form to:
 C-Net, 615 St. Andrews Rd., Columbia, SC 29210
 E-mail to: C-Net@ChristianEducation.org
 Phone: 803-798-7558 Fax: 803-798-7548

For Office Use Only	
_____	Access
_____	Excel
_____	Confirm. Sent
_____	Amount Paid
_____	No. Attending