

Child Passenger Restraint Safety Training

This class is required for all providers and other adults who will be transporting childcare children under the age of 9 years old. Four out of five seats are installed incorrectly which could have fatal results. The smallest of things make the BIGGEST difference. Traveling with children, under your care, in child restraints, with the above stats, opens your door to HUGE liability issues. Learn how to install them correctly and protect yourselves.

Instructor: Diane Hrabe - Certified Trainer

Date: Tuesday, October 4, 2011

Tuesday, November 1, 2011

Time: 6:30 – 9:30 pm (3 hours training credit)

Location: Jordan Middle School - Lecture Room

500 Sunset Drive, Jordan, MN 55352

Cost: \$20 SCLFCCA Members

\$25 Non-Members

Maximum Number of providers: 20

No walk-ins allowed

Registration Deadline: September 26, 2011

October 26, 2011



- All class fees are non-refundable
- For training questions please email michelle.herzog@yahoo.com
- Please check out the web site for more training information www.sclfcca.com
- Please fill out a registration form for your substitutes, helpers and second adults who will be attending with you. If you are a SCLFCCA member they pay the members price as well.

- Directions: From Shakopee take HWY 169 S to Hwy 282 (Turn left). Turn right on Creek Lane S. (Right after Radermachers Grocery Store). The street turns into Sunset Drive. The Middle School is on the right hand side of street. If you get to the stop sign you have gone too far.

Registration Form for Child Passenger Restraint Safety Training

Name _____ Phone (_____) _____

Address/City _____ MN _____

Email Address _____ County _____

_____ Helper, Second Adult or Substitute for _____ (provider)

Member of SCLFCCA? _____ Yes _____ No

Please check class date you wish to attend:

_____ Tuesday, October 4, 2011

_____ Tuesday, November 1, 2011

Training Cost:

_____ \$20 SCLFCCA Members

_____ \$25 Non-Members

I would like to become a member of the SCLFCCA.

_____ \$ 25.00 New/Expired Member

_____ \$ 20.00 renewal of **current** membership

Please make check payable to **SCLFCCA**. Send check and registration to:

Michelle Herzog
3110 173rd St.W
Jordan, MN 55352

For office Use Only: Check #

Class Fee

Membership

Date Received