

Wisconsin Head Start Association 2011 SUMMER QUARTERLY June 8 and 9

HEAD START/EARLY HEAD START PROGRAM:						
CONTACT PERSON: CONTACT PHONE/EMAIL:						
PARTICIPANTS:	Director Affiliate	Parent Affiliate	Staff Affiliate	MANAGERS: Admin. and Fiscal or Technology Services	Please provide <u>TITLE and EMAIL ADDRESS</u> for each <u>MANAGER</u> (this info. is not needed for Affiliate participants):	
Example: Debbie Doe	X					
Example: Jane Smith				Admin. & Fiscal	Operations Manager jsmith@localheadstartprogram.org	
Please send completed registration form to:	Registration fee is \$60 per person. Registration is due by <u>TUESDAY</u> , <u>MAY 31, 2011</u> .					
Wisconsin Head Start Association 122 E. Olin Avenue, Suite 110 Madison, WI 53713	Who? Director(s) Parent(s)	tor(s) #			Please forward completed registrations to WHSA at your earliest convenience and by Tuesday, May 31. <i>It is NOT necessary to hold</i>	
① 608-442-6879 Fax: 608-442-7672	Staff Affiliate Manager(s)	# #		until payment may be	until payment may be attached. Important event planning relies upon accurate numbers. Thanks!	
kovarik@whsaonline.org	TOTAL AMOUNT DUE:					