EATSIPEC Workshop Series Registration form



Please complete this form and return to Danielle Cassidy by email at EATSIPEC@dete.qld.gov.au as soon as possible, but no later than one week before the first workshop in the series.

Course details			
Course dates			
Venue			
Time			
Kindergarten program provider details			
Name of Service		Service type (eg Kgn, LDC)	
Service address			
		Service phone number	
Service email			
Participant details (Note: participants are required to attend all four (4) workshops.)			
Attendee full name		Director/teacher/ educator/other	Special requirements

Please provide the names of the people who will be attending the workshops and identify their position within the service by choosing from the list shown. This is their primary role (80% time spent doing this role on daily basis). Please note kindergarten teacher has fouryear qualification. If 'Other' is applicable, please specify. Please indicate if any participants have special requirements (eg dietary).



