

Wisconsin Head Start Association 2011 WINTER QUARTERLY January 12 and 13

HEAD START/EARLY HEAD START PROGRAM:						
CONTACT PERSON: CONTACT PHONE/EMAIL:						
PARTICIPANTS:	Director Affiliate	Parent Affiliate	Staff Affiliate		agers: ERSEA, Health & Nutrition, or ansportation Services	Please provide <u>TITLE and EMAIL ADDRESS</u> for each <u>MANAGER (</u> not needed for Affiliate participants):
<i>Example:</i> Debbie Doe	Х					
Example: Jane Smith					ERSEA	Enrollment Coordinator jsmith@localheadstartprogram.org
Please send completed registration form to: Wisconsin Head Start Association 122 E. Olin Avenue, Suite 110 Madison, WI 53713 © 608-442-6879 Fax: 608-442-7672 koyarik@whsaonline.org	Registration fee is \$60 per person. Registration is due by MONDAY, JANURY 3, 2011.					
	Who? Director(s) Parent(s)	How Many? Total \$ # # #			Please forward completed registrations to WHSA at your earliest	
	Staff Affiliate Manager(s) TOTAL AMO	# # UNT DUE:			convenience. It is NOT necessary to hold until payment may be attached. Important planning relies upon accurate numbers. Thanks!	