Making a Difference School Wellness Conference

WHAT:
Do you want to improve student attendance, attention, behavior, and test scores? Did you know that incorporating health and wellness into your school is an evidenced-based strategy to support these improvements, as well as to improve the overall health of your students? Join your colleagues to learn from professionals and local schools about mental health, yoga, adaptive physical education, vaping, staff wellness and more. Network with local organizations who can support your school to develop a culture of wellness and make a difference in the lives of your students and staff.

WHERE: The Holland Willows, 177 Savage Rd., Holland, NY 14224

WHEN: Tuesday, May 21, 2019
TIME: 9:00 am – 3:00 pm (registration 8:30 am)

TARGET AUDIENCE: Administrators, board members, educators, health & PE teachers, school food personnel, school nurses, school wellness teams, 7th-11th grade students, parents and interested community organizations.

FACILITATOR(S): Kate Huber

COST: $85/per participant (Lunch is included)  CODE: 535.009.02
Charters are $94/per participant. This cost includes the 10% Charter processing fee.

If you have not made arrangements for payment through a Purchase Order (PO), CSD Billing thorough Erie 1 BOCES Billing, a Cross Contract through your administrator, or pre-paid, you MUST bring a check for $85 OR $94 made out to ERIE 1 BOCES. Thank you! **NOT COVERED UNDER THE E1B TITLE IIA CONSORTIUM**

CTLE: CTLE Hours: 5 ELL Hours: 0 Pedagogy Hours: Yes Content Hours: Yes

Follow your school district’s procedures to register for workshops. For further information, contact Kate Huber at (716) 821-7566 or khuber@e1b.org. Please contact Elvie Mertz at (716) 821-7221; FAX (716) 821-7556 or Email: emertz@e1b.org for registration information or cancellations. ****ALL CANCELLATIONS MUST BE IN WRITING ONLY- Email or Fax is accepted!****

Cancellation Policy: Cancellations are required at least 48 business hours prior to the start of the workshop to allow us to fill the event from our waiting list. Failure to do so will result in your district being charged for the event. All no-shows will be billed for the full amount of the event. WHEN YOU ARE OFFICIALLY REGISTERED, AN AUTOMATIC EMAIL CONFIRMATION WILL BE SENT. PLEASE MAKE SURE YOUR EMAIL IS CORRECT!

We will only contact you for an event postponement or event cancellation or if you are on the wait list.

Registration Form IRT# 712: Please Print to complete this registration portion and return completed flyer to:
Elvie Mertz, 355 Harlem Rd., W. Seneca, NY 14224 emertz@e1b.org  FAX – 716-821-7556

Participant Type: O Administrator O Teacher ** O Paraprofessional O Other: ______________________

Sub Reimbursement: Full: O YES O NO ** Teachers: Please indicate your subject area ______________________

NAME: _________________________ _________________________ POSITION/GRADE LEVEL: ____________

EMAIL ADDRESS: ____________________________________________ _________________________

WORK PHONE: (____) ___________ X______ HOME PHONE: (____) ___________ (only needed for event postponement)

DISTRICT: ______________________________ SCHOOL BLDG: ______________________________

NEED CTLE CERTIFICATE? ___NO or ___YES. IF YES, PROVIDE REQUIRED MONTH & DAY OF DOB: __/____

*OPTIONAL CTLE INFO FOR CERTIFICATE: Year of DOB: _______ Last 4 Digits of SSN: _________

REQUIRED: S.D. ADMINISTRATOR’S SIGNATURE: __________________________ DATE: __________

*****ALL BILLING WILL GO THROUGH BOCES BILLING UNLESS NOTIFIED OTHERWISE*****