

## 2018 Safe Sitter Course

Choose Course	Location	Date/Time	Fee
<input type="checkbox"/> 2-Day Safe Sitter Camp	<b>Health First Training Center</b> 3470 N. Harbor City Blvd. Melbourne, FL 32935	<b>Tuesday–Wednesday,                      April 3–4</b> 9 a.m.–4p.m.	\$120.00*
<input type="checkbox"/> 1-Day Safe Sitter Course		<b>Tuesday, July 10</b> 9 a.m.–4p.m.	\$85.00
<input type="checkbox"/> 2-Day Safe Sitter Camp	<b>Palm Bay Hospital</b> 1425 Malabar Road NE Palm Bay, FL 32907 <i>(Conference Room—Go to the west side                      of the ER, Physician’s Office Building)</i>	<b>Tuesday–Wednesday,                      May 29–30</b> 9 a.m.–4 p.m.	\$120.00*

*\* Bring a friend and you both get \$10.00 off*

Student Name: \_\_\_\_\_ Age (must be at least 11yrs old) \_\_\_\_\_ Male / Female

Student Name: \_\_\_\_\_ Age (must be at least 11yrs old) \_\_\_\_\_ Male / Female

Parent/Guardian Name: \_\_\_\_\_

Phone: Home/Work: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

**Dear Parent/Guardian(s):** A great deal of information is presented in a short period of time during the Safe Sitter® course. We want every child to succeed in the course, and we will work with you to make alternate plans if your child has difficulty keeping up. Please let us know if there is anything about your child that we should know to help your child succeed.

**Allergies:** Does your child have any allergies such as food or latex?  Yes  No

If yes, please explain: \_\_\_\_\_

**Choose a payment method and** send with your signed registration form to Health First Training Center:

- Fax: 321.254.0795
- Scan/email: [Training@Health-First.org](mailto:Training@Health-First.org)
- Mail: 3470 N. Harbor City Blvd., Melbourne, FL 32925

Check (payable to Health First Training Center)

VISA  MASTERCARD  DISCOVER  AMEX

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

**Cancellation/Fees:** By signing this registration form I acknowledge that if I cancel my registration, I must do so at least **48 hours before** the program begins to avoid forfeiting my course fee.

- **A \$10 administrative fee will be charged for ALL refunds.**

**I will take all responsibility for deciding whether my child is capable and mature enough to babysit.**

Signature of Parent/Guardian (required): \_\_\_\_\_ Date: \_\_\_\_\_