



# Community Child Care Council (4C's) of Alameda County

*Providing Services to Families, Children, and Child Care Professionals since 1972*

## Child Care Health and Safety Training

4C's offers Infant/Child CPR and First Aid Training and Preventive Health Practices in our Hayward Office. These classes are designed especially for all types of child care providers and meet the requirements for child care licensing. Please note:

- **PREREGISTRATION AND PREPAYMENT ARE REQUIRED.** Download and complete the registration form. Make check or money order payable to 4C's of Alameda County. Space is limited so register early.
- Mail registration form and payment to: 4C's of Alameda County, Attention Health & Safety 22351 City Center Drive, Hayward, CA 94541. If you want to pay in person you can bring the registration form and exact amount to 4C's during business hours. A confirmation will be sent by email.
- If you miss a class due to an emergency you can reschedule one time, provided you notify 4C's either before the class or within two working days after the class. Please call Diana Cortes at 510-690-2164.
- There are no refunds for classes. If you don't come and you don't reschedule, your payment is forfeited. Substitutions may be allowed with prior arrangement.
- For health and safety reasons, children are not allowed to accompany parents to the class.
- Please arrive 15 minutes prior to the class start time to allow for registration. **NO LATE ARRIVALS WILL BE ADMITTED.** The start time is strictly enforced.
- Wear comfortable clothes to the CPR/First Aid classes. You will be practicing on the floor. Instructors will model adaptations for those who are not able to get down on the floor.
- No food will be provided during classes. Bring a sack lunch and your own snacks and drinks.
- 4C's strives to provide a fragrance-free training environment. Please refrain from wearing scented products; persons with environmental sensitivities may be in attendance.
- As funds allow, and with proper documentation, you **MAY** be eligible for reimbursement. Contact your local child care resource and referral agency for details.

Attention Attendee: **KEEP FOR YOUR RECORDS**

REMINDER: *I registered for:* \_\_\_\_\_ *Date/Time of class:* \_\_\_\_\_ *Paid \$* \_\_\_\_\_

## 4C's Child Health and Safety Training Registration Form

Name (please print) \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

(Required for confirmation – print clearly)

I work in a:    \_\_\_ Center    \_\_\_ Family Child Care Home    \_\_\_ Perspective Provider    \_\_\_ other

Registrations must be received by the Wednesday before the Saturday class. If after, please call **510-584-3105** for availability.  
Receive a free CPR/FA textbook and DVD when taking CPR/FA class!

*Please mark the class you want to attend. All classes take place at the 4C's Office, 22351 City Center Drive, Hayward 94541*

✓	CLASS	DATE	TIME	LANGUAGE	PRICE
	CPR/First Aid	Saturday, January 10, 2015	9:00am-5:00pm	English	\$90
	Preventive Health Practices	Saturday, February 7, 2015	9:00am-4:00pm	English	\$50
	CPR/First Aid	Saturday, February 28, 2015	9:00am-5:00pm	English	\$90
	CPR/First Aid ( <i>Chinese</i> )	Saturday, March 14, 2015	9:00am-5:00pm	<i>Chinese</i>	\$90
	CPR/First Aid	Saturday, March 21, 2015	9:00am-5:00pm	English	\$90
	CPR/First Aid ( <i>Spanish</i> )	Saturday, March 28, 2015	9:00am-5:00pm	<i>Spanish</i>	\$90
	Preventive Health Practices ( <i>Chinese</i> )	Saturday, April 18, 2015	9:00am-4:00pm	<i>Chinese</i>	\$50
	CPR/First Aid	Saturday, April 25, 2015	9:00am-5:00pm	English	\$90
	Preventive Health Practices ( <i>Spanish</i> )	<i>TBD May 2015</i>	9:00am-4:00pm	<i>Spanish</i>	\$50
	CPR/First Aid	Saturday, June 20, 2015	9:00am-5:00pm	English	\$90
	Preventive Health Practices	Saturday, June 27, 2015	9:00am-4:00pm	English	\$50

Make check or money order payable to: **4C's of Alameda County**

Note: A \$20 Discount offered if enrolled in both CPR/First Aid class and the Preventive Health Practices class- Total \$120.00

For office use only: Confirmation emailed on \_\_\_\_\_

Payment: Cash \$ \_\_\_\_\_ Check \$ \_\_\_\_\_ # \_\_\_\_\_ M.O. \$ \_\_\_\_\_ # \_\_\_\_\_ Date: \_\_\_\_\_ Staff Initials \_\_\_\_\_