



Practical Parent Education

Strengthening families in our community

Parent Engagement Training
Registration Form

Dates of Training: **September 16 & 17, 2021**

Training Location: **ONLINE Training**

Registrant Name: _____

School/Affiliation: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-mail: _____

Billing Address (if different from above) _____

City: _____ State: _____ Zip: _____

Billing Information:

New Parent Engagement Facilitation Package, including Parent Engagement Training, PPE Online Curriculum (English and Spanish), *Parenting Quick Tips* and *Power Point Presentations*

Total Cost = \$1,000 per Registrant*

***PPE reserves the right to cancel training if the minimum is not met.**

Please Choose One: Registration will not be processed without payment or purchase order.

_____ Payment enclosed; make check payable to Practical Parent Education

_____ Please bill me; Purchase Order number _____

_____ Please charge my (circle one) Visa or Mastercard:

Number _____ Name on Card _____

Expiration Date _____ VIN (security code on back of card) _____

Signature _____

Please complete this form and return to PPE via either:

- **Fax: 888-789-3684**
- **Mail: Mary Schwartzkopf, Practical Parent Education, 2300 W. White Ave., Suite 102, McKinney, TX 75071, or**
- **Email: ppe@practicalparent.org**

If you have any questions, please call 877-340-6262, ext. 106. Thank You!



Practical Parent Education

Strengthening families in our community

TRAINING NEEDS ANALYSIS

Dates of Training: **September 16 & 17, 2021**

Training Location: **ONLINE Training**

In order for Practical Parent Education Consultant (trainer) to accomplish your team's training objectives, please have each participant complete the following and **email** it to back to **ppe@practicalparent.org**.

1. Participant Name _____

2. Title _____

3. Email address _____

4. Work phone Number _____

5. Job assignment _____

6. What do you feel are your top 3 objectives for your job and for the training?

7. What do you want to get out of the training? You will be asked to answer this question during the 1st part of the training.

Thank you in advance for your help. If you have questions, feel free to call or email us.

Practical Parent Education

2300 W White Ave. Ste. 102

McKinney, TX 75071

P 877-340-6262 ~ F 888-789-3684

ppe@practicalparent.org

www.practicalparent.org