

REGISTRATION

NBACL 60th Anniversary Conference

October 27th and 28th, 2017

Registration Deadline: October 20th, 2017 Payment must be received no later than October 20th, 2017

(Please print)

Last Name: _____ First Name: _____

Last Name: _____ First Name: _____

Association (if applicable): _____

Home Address: _____

City: _____ Postal Code: _____ Province: _____

Phone (hm): _____ Phone (wk): _____ Phone (cell): _____

Fax : _____ Email: _____

Please indicate method of payment:

<input type="checkbox"/>	Cash or money order	Cheques made payable to: NBACL/ANBIC <i>*please do not mail cash</i>
<input type="checkbox"/>	Cheque	
<input type="checkbox"/>	AMEX	
<input type="checkbox"/>	MasterCard	
<input type="checkbox"/>	VISA	

Please send your completed registration form to NBACL:

Mail: 800 Hanwell Road, Fredericton, NB E3B 2R7

Fax: 506-453-4422 **Email:** nbacl@nbnet.nb.ca

Name of credit card holder: (First) _____ (Last) _____

Credit Card Number: _____ Expiry Date: _____

Amount: _____ Cardholder Signature: _____

ACCOMMODATIONS

The 60th Anniversary Conference has a reserved block of rooms at the Fredericton Inn.

Room Rate: \$114.00 night+ HST (max of 4 people per room) *Please book early, as space is limited.*

For Hotel Accommodations contact the Fredericton Inn: Toll Free: 1-800-561-8777

Please notify reservation agent that you wish to request the 'NB Assoc. For Community Living' rooming block rate.

Those attending the conference are responsible for their own accommodations.

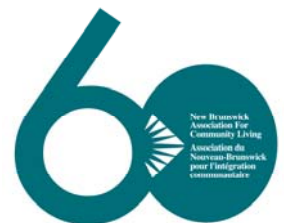
For more information and to register, please contact:

Rebecca Pilson, Planning & IT Coordinator, NBACL

Email: rpilson@nbacl.nb.ca

Tel: 1-866-NBACL 4U (622 2548) **Direct:** 506-453-8635 **Fax:** 506-453-4422

Web: www.nbacl.nb.ca



NOTE TO FAMILIES : * A limited number of grants are available to support families to attend the 60th Anniversary conference. Grants may be provided up to a maximum of \$350 per family.

For a grant application, contact: Rebecca Pilson, Planning & IT Coordinator, NBACL **Email:** rpilson@nbacl.nb.ca

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October 27th and 28th, 2017

Please check the appropriate box to indicate your language of preference: English French

(To indicate which sessions you are registering for, please place a check mark next to the fee amount below)

PRE-CONFERENCE DAY – Friday, October 27th

Pre-Conference Day with Shelley Moore 9:00 am – 3:00 pm (lunch provided)
 “Inclusive Education: who? What? Where? Why?”

Fee	All Day Workshop includes Lunch and Break	\$85 + HST	
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Conference Opening Keynote/Champions of Inclusion Awards Ceremony Only 6:00 pm—10:00 pm

Fee	Professional/Family Member/Individual	\$50	
	Family Rate (2 members or more from same household)	\$75	
	Person With a Disability/Student	\$35	

CONFERENCE DAY Saturday, October 28th

Full Conference **Friday , October 27th & Saturday, October 28th**
 6:00pm -10:00pm 8:00am - 4:45pm
 Includes lunch & all breaks * Does not include Pre-Conference Day Registration (Friday, 9:00 am-3:00 pm)

Fee	Professional/Family Member/Individual	\$125	
	Family Rate (2 members or more from same household)	\$200	
	Person With a Disability/Student	\$75	

NBACL Annual General Meeting (AGM) * Free to Attend *

Saturday Conference **Saturday, October 28th** 8:00am - 4:45pm
 Includes lunch & all breaks

Workshop Fee	Professional/Family Member/Individual	\$75	
	Family Rate (2 members or more from same household)	\$125	
	Person With a Disability/Student	\$40	

Childcare Friday, October 27th, 6pm-10pm Location: Fredericton Inn

Fee/Child	Snacks, lunch and activity costs will be provided	\$5	
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Childcare & Sibshops Saturday, October 28th, 8am-5pm Location: YMCA on York Street

Fee/Child	Snacks, lunch and activity costs will be provided	\$10	
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 Email: rpilson@nbacl.nb.ca

CONFERENCE DAY WORKSHOP SELECTIONS

Saturday, October 28th



- NBACL 101 8:00am - 9:00am
- NBACL Annual General Meeting (AGM) 9:00am - 12:00pm
- Lunch & Launch | Canada 150 History Project 12:00pm - 1:00pm
- Presentation** *Inclusive Education... how? Success for all students* 1:15pm - 4:30pm
Presented by: Shelley Moore (*Simultaneous Interpretation*)

PLEASE SELECT BELOW IF YOU HAVE NOT SELECTED TO ATTEND ABOVE PRESENTATION @ 1:15 - 4:30pm



Breakout Sessions A | Choose one session to attend 1:15pm - 2:45pm

- A. *Accessing and Hiring Private Workers*
Presented by: Andrea Randon & Ken Pike (*English*)
- B. *Navigating Systems and Developing Stronger Voices for Children : Parent Power*
Presented by: Danny Soucy (*French*)
- C. *Transition Planning*
Presented by: Lynn Akmens and René Ward (*English*)
- D. *Sexcess for Parents in the Early Years*
Presented by: Angela Haché & Elizabeth Kearns (*English*)
- E. *Care for the Caregiver*
Presented by: Maxine Giberson (*English*)



Breakout Sessions B | Choose one session to attend: 3:00pm - 4:30pm

- A. *Accessing and Hiring Private Workers*
Presented by: Roxane Perreault (*French*)
- B. *Navigating Systems and Developing Stronger Voices for Children : Parent Power*
Presented by: Danny Soucy (*English*)
- C. *Quality Inclusive Education in NB – Reflections on a remarkable journey.*
Presented by: Alex Dingwall (*English*)
- D. *Sexcess and Healthy Relationships*
Presented by: Elizabeth Kearns (*English*)
- E. *Care for the Caregiver*
Presented by: Maxine Giberson (*English*)

For more information, please contact :

Rebecca Pilson - Planning & IT Coordinator

Tel: 506-453-8635

Email: rpilson@nbacl.nb.ca **Toll Free:** (866) 622-2548 option #2

Childcare & Sibshops

Please submit one form for each participant requiring services.

Name of Child/Youth (please print) : _____ Male: Female:
Age : _____ Medicare Number : _____

Attending: **Childcare (infant - 18 yrs)** **Sibshops (8yrs - 12 yrs)**
Will a support person be accompanying your child? Yes: No: Name of support person : _____

In what language does your child communicate? _____

How does your child communicate (i.e. signs, picture board, some words)? _____

What activities does your child enjoy/not enjoy? _____

Please list allergies / special requirements (food, medication, other) : _____

Does your child require assistance with eating, bathroom? Assistance: Guidance:

Does your child require a nap? Yes: No: Does your child have a medical condition (s) that childcare staff should be aware of? Yes: No:

Will your child require medication Yes: No:

If yes please list medication (s) : _____

Dosage : _____ Time to administer : _____

*** parent/guardian (s) responsible for administering medication.**

Who has permission to pick up your child? : _____

Cell Number (s) : _____

*** If changing pick up arrangements, parent/guardian (s) must call in advance. (506-476-2506)**

Authorization

Name of Parent/Guardian (please print)

Name : _____ Signature : _____ Date: _____

Name of Parent/Guardian (please print)

Name : _____ Signature : _____ Date: _____

Childcare **Schedule**

Infant - 18 Years of Age

Friday 6:00pm - 10:00pm

Location: Fredericton Inn

Saturday 7:30am - 5:30pm

Location: YMCA on York Street

Sibshops **Schedule**

Siblings 8 years - 12 years of age

Saturday 7:30am - 5:30pm

Location: YMCA on York Street