



LITTLE FRIENDS CENTER FOR AUTISM

AUTISM TRAINING



GET SET FOR SUMMER SERIES

For PARENTS & PROFESSIONALS!!!!

Target key concerns before school lets out and long, lazy summer days begin!!

4/07 Caring for the Caregiver
by Maggie Lyons **6:30 - 8:30 p.m.**

4/27 Visual Systems for Now and the Future
by Carol Paske

5/13 Help! There's a Stranger in My House
by Maggie Lyons **6:30 – 8:30 p.m.**

Payment and registration form must be received one week prior to training date in order to attend. If you do not receive confirmation within 2 weeks, contact Kelly.

All trainings are scheduled from:
2:30 – 4:30 p.m.
(UNLESS SPECIFIED)
Location:
Little Friends Center for Autism
140 N. Wright St.
Naperville, IL 60540
3rd Flr (If special accommodations are needed, please contact us.)
(630) 305-4196
Fax: (630) 305-4785
e: kronan@lilfriends.com
COST: \$38/per person
CEU'S & CPDU'S PROVIDED

REGISTRATION FORM - _____

SPECIFY DATE/TITLE OF TRAINING(S) COST: \$38 per person / training (refunds not available)

Contact person:	Address:
Agency name (if applicable):	Phone:
E-mail to receive confirmation: (If you wish to be notified of future trainings)	# of parents attending: _____ # of staff/professionals attending: _____
PAYMENT METHOD (MUST be enclosed) Credit card amount: _____ Amount of check enclosed: _____ (Make payment to <u>LITTLE FRIENDS CENTER FOR AUTISM.</u> & write, "Training," in the memo section.)	Credit Card: (circle one) VISA MC AMEX DISC (other, specify) _____ Credit Card # _____ Exp Date _____ Security Code _____ (3-digit number on back of card)

Payment and registration form must be received one week prior to training date at: LFCA / ATTN: Kelly
1001 E. Chicago Ave., Suite 151, Naperville, IL 60540 or sent to a private fax: (630) 305-4785.