



**Maryland State Child Care Association**

**Conference by the Sea**

**Facilitator Request Form**

Name: \_\_\_\_\_

Name of Center or Program you represent: \_\_\_\_\_

Email Address of Center/Director: \_\_\_\_\_

Personal Email Address: \_\_\_\_\_

Center/Program phone number: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Years of experience in Child Care Profession: \_\_\_\_\_

Please check/ indicate your position:  Aide  Lead Teacher  Director  Owner

Credential Level \_\_\_\_\_

Please indicate days available to Facilitate at Conference by the Sea:

Thursday  Friday  Saturday  Sunday

Please provide a full list of classes you will be attending at the Conference by the Sea (or provide a copy of your confirmation email): \_\_\_\_\_

Thank you for your interest and willingness to be a leader!

MSCCA will contact you via email on or before March 30, 2019 to confirm your request and, if you are chosen, your facilitator information will be attached.

Please contact Marcia Tivoli with all questions and request at [pvadirector@gmail.com](mailto:pvadirector@gmail.com) For additional information, contact Christina Peusch at [CBTS19@mscca.org](mailto:CBTS19@mscca.org) or call 410-820-9196.