

Breastfeeding Peer Counselor Quarterly Continuing Education Training REGISTRATION

Please print or type:

Name: _____

Title: _____

Email: _____

Agency: _____

Address: _____

Work Phone: _____ Cell Phone: _____

Supervisor's Name: _____

Supervisor's Work Phone and Email Address: _____

Please check the training you plan to attend and fax registration to contact at chosen site at least 10 business days prior to the training date.
NOTE: Participants must register for BFPC quarterly continuing education training in the Perinatal Region in which their agency is located.

—	Perinatal Region I Mountain Area Health Education Center Asheville, NC Date: Thursday, November 17, 2016 Contact: Georganna Cogburn Fax: 828-257-4768 Georganna.Cogburn@mahec.net Phone: 828-2574754	—	Perinatal Region II Forsyth Medical Center (Novant) Winston-Salem, NC Date: Friday, November 4, 2016 Contact: Alison Moore Fax: 336-277-8195 ACMoore@novanthealth.org Phone: 336-486-7428
—	Perinatal Region III Mahon Pavillon, Freedom Park Charlotte, NC Date: Wednesday, November 9, 2016 Contact: Rachel.Davis@mecklenburgcountync.gov Fax: 704-336-4629 Phone: 980-314-4293	—	Perinatal Region IV Wake County Human Services Raleigh, NC Date: Wednesday, November 16, 2016 Contact: Jam Gourley Fax: 919-212-7558 Jam.Gourley@wakegov.com Phone: 919-280-8684
—	Perinatal Region V Cumberland County Health Dept. 1235 Ramsey Street, Fayetteville, NC Date: Wednesday, November 9, 2016 Contact: Norma Escobar Fax: 910-798-6606 NEscobar@nhcgov.com Phone: 910-798-6542	—	Perinatal Region VI Craven County Health Dept 2818 Neuse Blvd., New Bern, NC Date: Tuesday, November 8, 2016 Contact: Hannah Edens Fax: 252-744-3040 EdensH@ecu.edu Phone: 336-339-0361

The contact at the chosen site will send confirmation of receipt of your registration along with specific information about the training. If you do not receive confirmation of receipt of your registration within 5 business days of the training, please call the contact at the chosen site.