

**SHAPING THE AGENDA:
WOMEN'S POLITICAL ACTION CONFERENCE**



**SHERATON CENTRE HOTEL
123 QUEEN STREET WEST, TORONTO, ON
OCTOBER 5-7, 2008**

Child Care Registration Form

Return by September 15, 2008

Number of children requiring child care _____

Last Name	First Name	Age	Sex	Health Card #

Does your child have any special dietary or medical requirements? _____

Does your child have a nap during the day? _____

I give permission for my child(ren) to participate in an excursion _____

Any special requirements for your child (bottles, diapers, special food) should accompany the child.

Unfortunately, due to prohibitive costs, **child care will not be provided if less than ten (10) children register.** If this happens, you will be contacted by phone.

RELEASE FORM

I hereby release the Ontario Federation of Labour from any and all claims for damages to the safety or health of my child, however caused.

Name of Delegate _____

Organization _____ Local # _____

Address _____

City/Town _____ Postal Code _____

Telephone [work] _____ [home] _____

[E-Mail] _____

Signature of Parent or Guardian

Date

Please complete and return form by September 15, 2008 to Sylvia Stewart, Ontario Federation of Labour, 15 Gervais Drive, Suite 202, Toronto, ON M3C 1Y8 or by Fax at 416.441.0722.