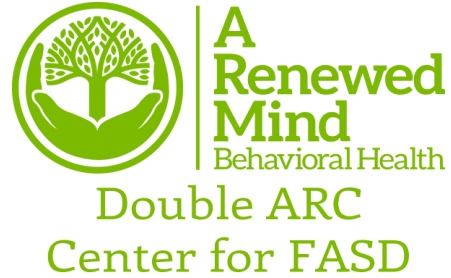


PRESENTED BY



# Surviving in the Classroom

ADHD?

Or something more?

Average to above average intelligence and verbal skills will mask the disabilities for the majority of individuals with Fetal Alcohol Spectrum Disorders (FASD).

Behaviors get labeled as:

- Bad
- Lazy
- Defiant

This workshop will provide basic information on FASD and give you some practical strategies for the classroom.



**When:** February 8, 2019 From 1:00 – 4:00 PM

**Where:** Regina Hall on the campus of Lourdes University

**Who:** Principals, Teachers, Special Education professionals, Intervention specialists, Education Students, all Education Professionals

**Why:** 1 in 20 children may be affected by Fetal Alcohol Spectrum Disorders, yet many are never diagnosed

**Registration Fee:** \$60 per person, \$50 each for 3 or more from the same school, or \$35 each for students

**\* Teachers will receive .3 CEU's for attending \***

**Registration due: January 25, 2019**

Register and pay online at: <http://www.doublearc.org/survivingintheclassroom/>  
Questions? Contact Bre Megyesi at (419) 890-1225

# Registration Form

Complete this registration form and return with your check payable to **A Renewed Mind**, 885 Commerce Dr, Perrysburg, OH 43551 or register and pay online on our secure web site <http://www.doublearc.org/survivingintheclassroom/>.

**Questions?** Contact Bre Megyesi: [bmegyesi@arenewedmindservices.org](mailto:bmegyesi@arenewedmindservices.org) or (419) 890-1225

**Registration Fee:** Due upon registration

\$60 for an individual from an organization

\$50 for 3 or more from the same organization

\$35 for an education student

Name _____	Phone _____	
School _____	Grade/Position _____	
Address _____	City/State/Zip _____	
Email _____	Amount Enclosed _____	

Name _____	Phone _____	
School _____	Grade/Position _____	
Address _____	City/State/Zip _____	
Email _____	Amount Enclosed _____	

Name _____	Phone _____	
School _____	Grade/Position _____	
Address _____	City/State/Zip _____	
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Email _____	Amount Enclosed _____	

FOR OFFICE USE ONLY	
Invoice #	Amt. Enclosed
Invoice Fee	Check #
Date payment received	