Post An Event Form

**Mandatory Fields \***

**Title of Event (description field)**

Short Description (description field)

**Registration Contact (description field)**

Presenter(s) (description field)

**Time(s)**

**Day**

* Time
* Repeating

**Location**

**Address**

**City/Town**

**Province**

**Cost (description field)**

**Sector (select one or more)**

* Early Care and Education
* Health
* Mental Health
* Nutrition
* Special Needs
* Family Support
* Aboriginal
* Other

Professional Development certificate available (?) (Information popup for this)

* + Yes
  + No
  + Upon request

Prerequisite (description field)

Required materials: (description field)

**Description of Event (description field) (Describe the event learning objectives, main activities)**

**Target Audience – this event is suitable for professionals who work with the following group(s).” with the following radio dial options (AND multiple selections accepted)**

**Infant/Toddler**

**Preschool Age**

**School Age**

**Extra Support Needs**

**Parents**

**Adults Instructors/Administrators**

**Other \_\_\_\_\_\_\_\_\_\_**

Upload a picture (picture of the trainer, book, event)

Event Sponsors (description field)

More Information (description field)

Group Discussion

* Yes
* No

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