***3 - Creating a Sense of Belonging in Early Childhood Settings***

**September 25, 2020 1:00 – 2:30pm**

We plan for the Arts, Cognitive Learning, Daily Routines, etc. Do we consider how we create experiences that provide for a sense of Belonging?

This presentation will discuss the following:

* What is Belonging?
* Rituals that Support a Sense of Belonging
* Curriculum that Supports Children’s Needs
* Environments that encourage Children’s Development

My role as an early childhood professional is to help children feel included. If you are concerned about how that happens come join us in creating A Sense of Belonging.

## Conference cost: $10.00 per session or $25.00 for all 3 sessions

## To Register: Mail the registration and payment to: NCFR

15896 W 3rd Street

Hayward, WI 54843

***(Registration will be accepted until September 18, 2020 or until the conference is full)***

**What to expect:** The day of the conference a zoom link will be emailed to you to connect to the session. The link will be different for each session.

Participants will need to sign in to the chat box.

Only registered participants successfully completing the session will receive Registry hours. One zoom link is required per participant.

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**Northwest Connection Family Resources – Spring Tribal Conference**

**1,2,3 COME LEARN WITH ME!**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Registry # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County/Tribe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ YS rating: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please register me for: Session 1 \_\_\_\_\_\_\_ Session 2 \_\_\_\_\_\_\_ Session 3 \_\_\_\_\_\_\_\_

**$10.00 per session or $25.00 for all 3 sessions**  Total payment enclosed \_\_\_\_\_\_\_\_\_\_\_