

HANDLE WITH CARE

“EARLY CHILDHOOD PROGRAM”

HOUSTON/FORT BEND, TX

Helping to create and maintain safer, more caring environments by teaching preventative actions that result in decreased need for physical restraint.

| | | |
|------------------|---|--------------------------|
| When: | DEC. 06, 2021 | 5:00 PM – 7:00 PM |
| Training: | Fort Bend County Sheriff's Dept. Gus George Training Academy 1521 Eugene Heimann Circle Richmond, TX 77469 | |
| Cost: | \$250.00 – BASIC PHYSICAL* \$250.00 – INSTRUCTOR* | |

This Early Childhood Program is designed for clinicians and teaching faculty caring for very small children from age 3 through the early elementary grades. HWC has been training nursery and preschool teachers and psychiatric hospitals serving children as young as three for decades. HWC has never received a single report of an injury to a preschool or elementary-aged child to date, which speaks volumes about how well engineered HWC methods are and to the good will and professionalism of nurses, childcare workers and teachers.

Verbal Intervention:

Its principles apply universally from preschool age children to adults and geriatrics. It is delivered to you in a distilled version relevant to this age group.

Personal Defense Techniques:

Our personal defense system for small children is limited to gently stabilizing a grab to clothing or hair by a tiny hand. A punch by a 4-year-old may not knock you unconscious but, it sure can hurt. We designed very passive “cover” blocking to protect your face and head. All HWC methods are designed to be safe with young unstable joints.

Physical Holding Methods:

Our centerpiece proprietary holding method for smaller children is the "Modified PRT for Smaller Children™." The Modified PRT for Smaller Children is engineered and proven to eliminate any stress to the young joints and tissues regardless of the resistance to the hold. You will not only learn the only passive hold specifically designed for this population, you will also be learning the only “hold and carry” method ever created. It is now possible for one adult to safely carry a small child from one area to another in order to minimize the disruption to others.

***VERBAL PROGRAM (9 AM – 5 PM) INCLUDED WHEN TAKING BOTH
PHYSICAL & INSTRUCTOR PROGRAMS**

This is an Early Childhood Program. Slots will fill fast.

To enroll or request additional information call:

Seminar Administrator: (845) 255-4031 / Fax: (845) 256-0094

Go To: www.handlewithcare.com

HANDLE WITH CARE – “EARLY CHILDHOOD PROGRAM”
HOUSTON/FORT BEND, TX- REGISTRATION FORM

Please Fax completed Form to: Seminar Administrator @ 845-256-0094

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Company Name: _____

Address: _____

City _____ State _____ Zip _____

Telephone: _____ Fax: _____

E-Mail: _____

Participant/
Name(s): _____

_____ Cell or Dir.# _____

_____ Cell or Dir.# _____

Wish to reserve the following slots:

| <u>Name of Agency</u> | <u># of Slots</u> | <u>Cost</u> |
|-------------------------------------|-------------------|--------------|
| Verbal Program 9 AM – 5 PM | _____ | \$xxx/Person |
| Early Childhood Physical Training | _____ | \$250/Person |
| Early Childhood Instructor Training | _____ | \$250/Person |

***VERBAL PROGRAM (9 AM - 5 PM) INCLUDED WHEN TAKING BOTH PHYSICAL & INSTRUCTOR PROGRAMS**

Payment should be made payable to Handle With Care Behavior Management System EIN 14-1803426 at 184 McKinstry Road, Gardiner, NY 12525, Tel: 845-255-4031. Payment can also be made at the time of training. I hereby represent that I am authorized to submit this Registration form on behalf of my agency. By registering, my agency is obligating payment for the above-registered people. Contractual terms associated with this training are incorporated herein and can be viewed on our web site: www.handlewithcare.com. To receive a refund, you must cancel 30 days before the scheduled training. If registered people are unable to attend due to sickness, weather or any other emergency or act of god a credit will be given for that person to attend another Handle With Care Seminar.

Signature of authorized agency agent

Date

Print Name, Title