

## **The Nancy Mansfield Family/Professional Workshop**

### **“Sharing the Journey: Real Stories and Real Strategies”**

Come learn from parents of children with visual impairment. Separate panels of parents, both English and Spanish-speaking, will share their experiences parenting a child with a visual impairment, and the often unwelcome comments from the public, friends or family members. These parents will team up in panel discussions to share their collective stories and dialogue with you

What we hope you will get from this workshop:

“Recognize that you are not alone.”

“Listen to real stories that may also sound like yours.”

“Learn new strategies to handle insensitive remarks.”

“Become empowered to face the public on your own terms.”

“Learn new ways to talk to your friends and family.”

“Learn to be a healing voice of communication.”

**Date: Saturday, March 24<sup>th</sup>, 2012**

**Time: 8:30AM – 3:00PM**

8:30-9:00	Registration/Child Care Registration
9:00-9:45	Name Tags/Family Albums
10:00-11:30	Parent Panel -English and Spanish panels
11:30-12:00	Both panels come together for wrap up
12:00-1:00	Lunch
1:00-3:00	Family Fun Activities

Please plan on staying all day to participate in some fun family activities and receive FREE home-made activity kits.

**Location: Blind Children’s Learning Center  
18542-B Vanderlip Ave  
Santa Ana, CA 92705**

Cost: \$15 per family, \$25 for professionals

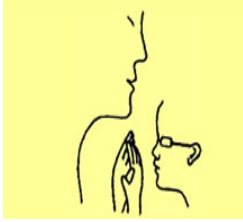
**Lunch and child care will be provided. Spanish translation will be available.**

Child care is provided from 8:30AM-12:30PM

### **How To Register for this Event:**

Mail form and payment to: Center for the Partially Sighted  
Attn: Tori Schladen  
6101 W Centinela, Ste 150  
Culver City, CA 90230

Call, fax or e-mail registration to:  
Phone: 323 9063138, Fax: 323- 663-0602  
email: [mdacosta@brailleinstitute.org](mailto:mdacosta@brailleinstitute.org) or  
[sstrafaci@brailleinstitute.org](mailto:sstrafaci@brailleinstitute.org)



**Birth to Five Vision Network**

[www.birthtofivevision.org](http://www.birthtofivevision.org)

**In Honor of Nancy Mansfield Family/Professional Workshop**

**“Sharing the Journey: Real Stories and Real Strategies”**

Registration Form

Please return by **March 17<sup>th</sup>, 2012**

Please make check payable to: Birth to Five Vision Network

Parent(s) Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Visually Impaired Child's name: \_\_\_\_\_ Age: \_\_\_\_\_

Program that provides services for your child's visual impairment:

\_\_\_\_\_

Names & ages of other children attending: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Names and relationship to child of additional adults attending: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Language preference for support group and informational handouts:

English

Spanish

Other: \_\_\_\_\_

How did you hear about the conference?

\_\_\_ website

\_\_\_ doctor

\_\_\_ child's teacher (name \_\_\_\_\_)

\_\_\_ other \_\_\_\_\_

\_\_\_ other parent

For Board Member use only.

Paid: Yes \_\_\_\_\_ No \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_

Total # of children \_\_\_\_\_ Total # of adults \_\_\_\_\_