

2022 Contact & Information Form

Please complete and return to the EIP office with your 2022 Training Organization Agreement and W-9.

Training Organization:		
Main contact person for gener	ral account correspondence:	
Name:	Email:	
Executive Director:		Email
Event Approval Contact:		Email:
Email for electronic payment r	notifications:	
Fiscal Contact:		Email:
Secondary Fiscal Contact:		Email
Additional Fiscal Contact:		Email:

Please check the box(es) of the counties/boroughs in which you provide training. This information will appear on the ECETP website and will be searchable by child care providers in need of training. Your training organization information will appear on the ECETP website unless otherwise specified.

Albany	Franklin		Oneida		Seneca
Allegany	Fulton		Onondaga		St. Lawrence
Bronx	Genesee		Ontario		Steuben
Broome	Greene		Orange		Suffolk
Cattaraugus	Hamilton		Orleans		Sullivan
Cayuga	Herkimer		Oswego		Tioga
Chautauqua	Jefferson		Otsego		Tompkins
Chemung	Kings		Putnam		Ulster
Chenango	Lewis		Queens		Warren
Clinton	Livingston		Rensselaer		Washington
Columbia	Madison		Richmond		Wayne
Cortland	Monroe		Rockland		Westchester
Delaware	Montgomery		Saratoga		Wyoming
Dutchess	Nassau		Schenectady		Yates
Erie	New York		Schoharie		ALL NY Counties
Essex	Niagara		Schuyler		