



The **Peel Elder Abuse Prevention Network (PEAPN)** is a collaborative of over 40 not-for-profit organizations, businesses and seniors that are working together to stop and prevent the abuse of older adults in Peel region through public education and advocacy. We often receive requests for training or presentations from professional organizations, businesses and senior groups across Peel region. In order to accommodate your request we require this form to be completed.

Date:

Name of Organization:

Address:

Contact Person:

Number:

Email:

Have you previously requested a PEAPN training/presentation? YES ___ NO ___

Request: Training Presentation Speaker for Regional/Provincial Conference or Event

Who will be attending the training/presentation?:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Long-Term Care Home | <input type="checkbox"/> Retirement Home | <input type="checkbox"/> Other residential setting | <input type="checkbox"/> CCAC |
| <input type="checkbox"/> Banking/Financial | <input type="checkbox"/> Community Services | <input type="checkbox"/> Hospital | <input type="checkbox"/> Seniors' organization |
| <input type="checkbox"/> Faith Based Organization | <input type="checkbox"/> Developmental services | <input type="checkbox"/> Justice (legal, victim services) | <input type="checkbox"/> Police |
| <input type="checkbox"/> Older Adult in the community | <input type="checkbox"/> General community member | <input type="checkbox"/> Youth | |
| <input type="checkbox"/> Other (identify): _____ | | | |

How many attendees will be attending the session? ___ (please note we require a minimum of 12 participants)

Topic of the Training/Presentation (30 mins-60 mins):

- Elder Abuse 101: Definitions, examples, prevention, and community resources
- Front line staff/volunteer training: definitions, examples, prevention, and response
- Staying financially fit (financial abuse)
- Other: Please specify: _____

Date and time of the training/presentation requested:

(Please confirm that a laptop, projector and speakers will be provided for the speaker)

Address/name of the venue where the session will take place:

Honorarium: Covers the cost of gas, mileage, print materials, and staff time. Please mark the appropriate box:

Gov./Non-profit organizations: \$50.00 Small business: \$75.00 Retirement Home/Long Term Care: \$150.00

Faith-based organizations: \$25.00 Seniors' organization: \$25.00

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