

Training Opportunity for Mental Health Providers! “Trauma and Youth Fire Misuse”



Burn Prevention Network will be hosting this one-day training seminar, featuring **Paul Schwartzman, M.S., L.M.H.C., D.A.P.A.**

During the **one-day training**, Paul will discuss the correlation between childhood trauma and fire misuse.

This seminar is intended for **mental health professionals** from the Greater Lehigh Valley and Berks County.

DATE: Monday August 20th
TIME: 8:30am-4pm
(registration begins at 8am)
LOCATION: Innovation Center,
One City Center, 5th Floor
707 Hamilton Street
Allentown, PA

We will be offering credit hours for
PENNSYLVANIA SOCIAL WORKERS,
MARRIAGE & FAMILY THERAPISTS AND
PROFESSIONAL COUNSELORS

LIMITED SPACE IS AVAILABLE - REGISTER TODAY!

Deadline for registration and payment: 8/10/18
Registration and more information available at
www.burnprevention.org/PAUL2018

**Cost for program is \$50.00 per person .
Lunch will be provided.**

Please direct questions to jessica.banks@lvhm.org



MORE ABOUT THE TRAINER:

Paul Schwartzman is the Executive Director of the Fingerlakes Regional Burn Association. He is also a licensed mental health counselor and consultant, and has been working with children and families for more than 34 years. He was among those who conducted original research and developed one of the first ever juvenile fire setter intervention programs in the United States. He is a nationally recognized trainer and speaker.

Trauma and Fire Misuse Registration Form

Registration for a one- day mental-health seminar given by Paul Schwartzman
Monday, August 20, 2018
Topic: Trauma and Fire Misuse

Online registration and more information available at
www.burnprevention.org/paul2018/

or

Fill out this form and
EMAIL: Jessica.banks@lvhn.org
FAX: 610-969-3940
MAIL: Burn Prevention Network
Attn: Jessica Banks
236 N. 17th Street
Allentown, PA 18104

NAME: _____

ORGANIZATION: _____

TITLE: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

EMAIL: _____

PHONE NUMBER: _____

Are you currently involved in the Mental Health Treatment of youth who misuse fire?

___ YES ___ NO

If yes, in what capacity? _____

I will pay the \$50 registration fee via:

___ Credit Card ___ Check (*fee is due no later than 8/10/18*)

Credit Card Info: (If you prefer to give CC info over the phone, call 610-969-3930)

Number on card: _____ *Exp. Date:* _____

Name on Card: _____ *Security Code:* _____

If paying by check, send to: Burn Prevention Network, 236 North 17th Street, Allentown, PA 18104