

DATE & LOCATION

SATURDAY, MARCH 24, 2007

Bucks County Community College
Allied Health Building
Rooms 202 & 203
275 Swamp Road
Newtown Township,
Bucks County, Pa 18940

“SUBSTANCE ABUSE and YOUR COMMUNITY”:

GUEST SPEAKERS

Gene DiGirolamo, Member, 18th
District, House of Representatives, Pa.

Diane Gibbons, Bucks County
District Attorney

Dr. Joseph Campbell, Bucks
County Coroner

Beverly J. Haberle, M.H.S.,
C.A.C., Executive Director, Bucks
County Council on Alcoholism and
Drug Dependence, Inc.

Chip Baker, Bucks County Council
on Alcoholism and Drug Dependence,
Inc.

CLASS SCHEDULE

8:30 A.M.	Registration & Continental Breakfast
9:00 A.M.	Program Begins
12:00 P.M.	Adjourn

Bucks County Association of Township
Officials
P.O. Box 189
Warminster, PA 18974

SUBSTANCE ABUSE & YOUR COMMUNITY

SPONSORED BY:

BUCKS COUNTY ASSOCIATION OF TOWNSHIP OFFICIALS (BCATO)



SUBSTANCE ABUSE & YOUR COMMUNITY

Date: Saturday March 24, 2007

Time: 8:30 am—12:00 pm

Location:

Bucks County Community
College
Allied Health Building
Rooms 202 & 203
275 Swamp Road
Newtown Township,
Bucks County, Pa 18940

COURSE DESCRIPTION

Topics to be discussed:

- Myths
- Epidemic Use of Drugs/
Alcohol
- Signs of Abuse
- Rise in DUI arrests (male &
female)
- Death of young people,
WHY?
- Misuse of prescription drugs
- Consequences (now & later)
- Services available

WHO SHOULD ATTEND?

This seminar is for
council members and
Supervisors.

The general public is welcome
to attend.

REGISTRATION INFORMATION

The registration fee for this workshop is \$10
per person to cover the cost of seminar.

To register, complete the form and return it
to BCATO. Registration Checks should be
made payable to BCATO and mailed along
with the registration form to:

Bucks County Association of
Township Officials
P.O. Box 189
Warminster, PA 18974

REGISTRATION DEADLINE:

March 21, 2007



REGISTRATION FORM

Sign up for: _____ Price _____
 SUBSTANCE ABUSE & YOUR COMMUNITY \$10.00

Name _____

Name _____

Name _____

Name _____

Name _____

Total: _____

Municipality _____

Address _____

City, State Zip _____

Phone _____

Method of Payment

Check

Walk-Ins Cash or Check Only

Signature _____

Contact person: Charles Metzger,
BCATO, Executive Director
215-441-9655

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