



ATTACHMENT PARENTING

Certified Attachment Parenting Practitioner Agreement-CAPP

Name:

Address:

Email:

Phone:

I agree to the following attachment parenting practitioner knowledge and practices:

1. I understand the Bowlby-Ainsworth Theory of Attachment.
2. I understand the basic parts of the brain and how the brain develops in childhood.
3. I understand the benefits of socialization and The Feeding Relationship by the Ellen Satter Institute.
4. I understand and endorse the benefits of flexible sleep arrangements and night-time parenting.
5. I understand and endorse non-punitive discipline and behaviour guidance.

6. I understand and endorse respectful communication, touch, and response, including Serve and Return interactions.

7. I understand and endorse the value of play as the main learning vehicle of childhood.

8. I will endeavor to incorporate all my knowledge and skill practice of attachment parenting theory into my professional practice to the best of my professional practice allows.

Signed: _____

Date: _____

Please send the following:

___ This agreement

___ Course completion certificate

___ Updated resume

___ \$149 fee by cheque, paypal or e-transfer to attachmentparentingcanada@gmail.com

All documents and payment may be emailed to:

attachmentparentingcanada@gmail.com

or

Attachment Parenting Canada Association

12018 Lake Erie Rd SE

Calgary, Alberta, T2J 2L8

Attachment Parenting Canada Association (APCA) will certify this individual as a CAPP Certified Attachment Parenting Practitioner, according to the documentation submitted from the applicant. Please allow 4 weeks for the Board to approve the documentation.

APCA will take no responsibility for the actions or intent of the applicant in case of negligence or malpractice and the applicant agrees to will hold APCA harmless from interests and liability.