9th Annual Arizona American Indian Youth Conference on Health and the Environment

“Empowering Youth: Take Care of Your Health and the Environment”

June 21 – 23, 2016

DoubleTree by Hilton Flagstaff, Arizona

Sponsored by the Inter Tribal Council of Arizona, Inc. Health and Human Services Programs and the Environmental Quality Programs

Funded by the Arizona Department of Health Services Teen Pregnancy Prevention Program
Purpose
The 9th Annual Arizona American Indian Youth Conference on Health and the Environment will provide information to motivate and encourage youth to take responsibility for their overall health and become better stewards of their environment.

Objectives and Activities
During the conference, youth will:

- Learn about health promotion and making healthy choices through fun and interactive workshops;
- Bring awareness that people’s health and well-being are directly connected to how we all treat the land, air and water;
- Prepare for higher education and become oriented to the Northern Arizona University

Target Audience
The conference is designed for American Indian youth ages 12 to 19 years old.

Location
The conference will be held at the DoubleTree by Hilton located at 1175 West Route 66, Flagstaff, Arizona 86001.

For more information about the conference location, visit the website at:
http://www.doubletreeflagstaff.com/

Registration
The conference is open to the first 100 youth with paid registrations. Complete the following required forms (attached) and return to the Inter Tribal Council of Arizona, Inc. (ITCA), along with payment:

- Group Registration (Chaperones must include their names on the registration form)
- Youth and Parent/Guardian Release Form (Must be signed by youth and parent/guardian)
- Emergency Contact Information Form (Must be signed by parent/guardian)
- Chaperone Release Form (Must be signed by chaperone)

All registration forms are due by Friday, May 27, 2016, to ITCA.

Registration Fee
To attend all three days of the conference, the registration fee is $75.00 per person (youth and chaperones). The $75.00 fee is charged whether you participate in one or all three days.
Registration Cancellation

Paid participants who are not able to attend the conference will receive a partial refund if they submit their written (fax, e-mail, or letter) request to Inter Tribal Council of Arizona, Inc. by June 3, 2016. An administrative fee will be charged for each cancellation at half the rate of each registration fee. The participant will be refunded the conference registration fee minus the administrative fee (e.g., $75 - $37.50 = $37.50).

Expect the refund process to take six (6) weeks from the date of cancellation to be received. After June 3, 2016, participants are no longer eligible for a refund, but may send an alternate to the conference in their place. Please contact ITCA if an alternate needs to attend the conference.

Chaperone Information

We expect one chaperone for every six (6) youth who attend the conference and we expect a female chaperone for female youth and a male chaperone for male youth. Chaperones will be responsible for transporting the youth to and from the conference site and college campuses. Please refer to the “Chaperone Release Form” regarding the chaperone’s responsibilities.

Hotel Information

DoubleTree by Hilton Hotel Flagstaff
1175 West Route 66
Flagstaff, Arizona 86001
Phone Number: (928) 773-8888
Fax Number: (928) 773-8860

Room Rates: The DoubleTree by Hilton Hotel Flagstaff will be offering a special room rate of $139.00 for a single or a double room. All rates are subject to the prevailing state and local taxes at the time of arrival. The current tax rate is 10.95% and $2.00 surcharge (subject to change).

Hotel Reservations: Participants are responsible for making their own guestroom reservations and paying for their guestrooms. To receive the group rate, please indicate you are a guest of the “Inter Tribal Council of Arizona, Inc.” Reservations must be guaranteed with a major credit card.

The deadline to make reservations to receive the group rate is Friday, May 20, 2016.

Important Deadlines

- Hotel Special Room Rate Friday - May 20, 2016
- Registration Deadline Friday - May 27, 2016
- Registration Cancellation with Partial Refund Friday - June 3, 2016
June 21, 2016 - Tuesday

Registration
11:00 AM – 12:00 PM

Welcome and Kick Off Luncheon,
Opening Session
12:00 PM – 2:15 PM

Break (15 minutes)

Workshop Sessions I
2:30 PM – 3:30 PM

Break (15 minutes)

Keynote Speaker
3:45 PM - 4:45 PM

End of Day 1 Announcements
4:45 PM - 5:00 PM

Adjourn
5:00 PM

June 22, 2016 - Wednesday

Continental Breakfast *(provided)*
Opening Announcements
8:00 AM – 8:30 AM

Transition to NAU Campus
8:30 AM – 9:00 AM

Campus Tour at NAU Campus
*(Tour includes presentation about NAU and Native American Student Services)*
9:00 AM - 11:00 AM

Lunch *(On your own at NAU Campus University Union and at the du Bois Center)*
11:00 PM – 12:30 PM

Transition to DoubleTree by Hilton Hotel
12:30 PM - 1:00 PM

Workshop Sessions II
1:00 PM – 2:00 PM

Break (15 minutes)

Workshop Sessions III
2:15 PM – 3:15 PM

Break (15 minutes)

End of Day Activity
3:30 PM - 4:30 PM

Announcements and Adjourn
4:45 PM
June 23, 2016 - Thursday

Continental Breakfast (provided)
Opening Announcements
8:00 AM – 8:30 AM

Morning Activity
8:30 AM - 9:30 AM

Break (15 minutes)

General Session Presentation
9:45 AM – 10:45 AM

Break (15 minutes)

Closing Session
Raffles, Evaluations, and Closing Announcements
11:00 AM

End of Conference
Hotel check-out and travel home safely
12:00 PM
Group Registration Form

| Group Name: |  |
| Tribe/Organization: |  |
| Contact Person & Title: |  |
| Complete Mailing Address: |  |
| Phone: |  |
| Fax: |  |
| Email: |  |

This form may be copied. Please print clearly.

<table>
<thead>
<tr>
<th>First and last name of each participant (For name badge)</th>
<th>Gender</th>
<th>Age</th>
<th>Chaperone (✓)</th>
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Please make check payable to: Inter Tribal Council of Arizona, Inc. What is your method of payment?

- [ ] Purchase Order # ____________
- [ ] Check/Money Order# ____________

Send payment and all completed registration forms to:

Inter Tribal Council of Arizona, Inc.
**Attn: Glenda Tovar**
2214 North Central Avenue
Phoenix, Arizona 85004

If you have any questions, please contact:

Glenda Tovar, Health Promotions Coordinator
Phone: (602) 258-4822
Fax: (602) 258-4825
Email: glenda.tovar@itcaonline.com
It is our desire to provide the best and safest possible atmosphere throughout the conference. All youth registrants and parents must read, sign and adhere to guidelines and agreement(s) provided.

I agree to assume the risk that unexpected events may occur and result in harm, injury or illness to me, or damage to or loss of my property while I am observing or participating in activities. I agree to indemnify the Inter Tribal Council of Arizona, Inc. and its funding source for any harm or damage associated with my participation or travel if the harm or damage is not due to the negligence or fault of the Inter Tribal Council of Arizona, Inc. I understand that my participation in these activities is voluntary.

In this agreement, “Inter Tribal Council of Arizona, Inc.” includes all their employees and agents.

I, (print full name) ____________________________ understand and agree to the following:

1. Possession and/or use of alcoholic beverages, weapons, tobacco products, and/or any type of illegal drugs are strictly prohibited. I am aware that if I am caught participating in the mentioned activities or in possession of the mentioned items, I lose all privileges to attend the conference and my chaperone will be responsible for transportation arrangements off the premises.
2. I agree to refrain from using any electronic devices (cell phones, MP3 players, handheld games, or any other distracting devices) during the conference. If I fail to follow this guideline, the items will be taken away and returned at the end of the day. Proper security for confiscated items will be provided, but the conference personnel will not be responsible for lost or damaged items. Use at your own risk.
3. I agree to dress in a manner that is considered appropriate and acceptable to the educational nature of the conference and will not dress in any way that may cause distraction, disruptions or conflicts amongst other attendees. Hats of any kind, bandanas or any kind of clothing bearing gang symbolism will not be tolerated.
4. I agree not to wander away from the conference premise during scheduled activities. I understand, if the ITCA staff is notified of thefts or damages, my parent/guardian will be held liable for my actions.
5. I agree to behave and respect others in a mature manner that does not allow for loud talking, yelling, vulgarity, profanity, horseplay or any other derogatory behavior.
6. I understand I will work with my chaperone to select the conference workshops that I will attend and agree to report promptly to all activities and events held throughout the conference to be an active participant.
7. I understand if I violate any of the guidelines during my participation of the conference activities, my parent/guardian will be notified.
8. I consent that photographs, video and/or audio recordings made of my voice or image may be used for developing printed educational and outreach materials. I understand these materials will be used only for non-profit and non-commercial use.
9. I consent that the Inter Tribal Council of Arizona, Inc. may use photographs, video and/or audio recordings made of my voice or image and that such shall be the producer’s property to view, to copy, or to distribute for any non-profit and non-commercial use.

Youth Signature ____________________________ Date __________

If participant is younger than 18 years old, Parent or Legal Guardian must also sign:

Parent or Legal Guardian Signature ____________________________ Date __________

Make sure this form is completed and attached for each youth, to the Group Registration Form.
Emergency Contact Information Form

From time to time emergencies can arise. Therefore, **please print clearly** in the sections below. This form will be used for emergency purposes only for this event.

<table>
<thead>
<tr>
<th>Last Name of Youth Participant</th>
<th>First Name of Youth Participant</th>
<th>Date of Birth</th>
<th>Male or Female</th>
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</thead>
</table>

**Emergency Contact # 1**

<table>
<thead>
<tr>
<th>Contact Name</th>
<th>Relationship to Youth Participant (e.g., Mother, Father or Guardian)</th>
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**Home Address**

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<tr>
<th>Name of Workplace</th>
<th>Work Phone</th>
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<table>
<thead>
<tr>
<th>Cell phone</th>
<th>Home Phone</th>
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**Emergency Contact # 2**

<table>
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<tr>
<th>Contact Name</th>
<th>Relationship to Youth Participant (Mother, Father or Guardian)</th>
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**Home Address**

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<th>Name of Workplace</th>
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**Is your child allergic to any food(s) or other substances? If so, write the names of the food(s) or substances to be avoided. Then write steps to follow if a reaction occurs:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Parent/Guardian Signature: ___________________________ Date: ____________
It is our desire to provide the best and safest possible atmosphere throughout the conference. **Chaperones are expected to cooperate with all staff at all times and to participate in all scheduled events.** Possession or use of alcoholic beverages, weapons, tobacco products, or any type of illegal drugs are strictly prohibited. **Please read and sign at the bottom of the release form.**

I agree to assume the risk that unexpected events may occur and result in harm, injury or illness to me, or damage to or loss of my property while I am observing or participating in these activities. I agree to indemnify the Inter Tribal Council of Arizona, Inc. and its funding source. I will not to sue the Inter Tribal Council of Arizona, Inc. and its funding source for any harm or damage associated with my participation or travel if the harm or damage is not due to the negligence or fault of the Inter Tribal Council of Arizona, Inc. I understand that my participation in these activities is voluntary.

In this agreement, “Inter Tribal Council of Arizona, Inc.” includes all their employees and agents.

**Group Chaperones may only fill out the one agreement and include with group registration.**

**Chaperones must ensure that:**

1. All registration forms and emergency information for each student has been completed and returned to participate in the conference.
2. Appropriate contact with youth participants will be maintained throughout the conference to ensure students are attending scheduled workshops, activities and meals.
3. In the event that I am called away from the conference or have to leave due to an illness or other unforeseen circumstances, I have made pre-arrangements for another representative from my tribe or program to assume the duties of lead chaperone for my assigned students.
4. I will do my best to help ensure the success of the conference by doing my part as chaperone.
5. I will transport youth to and from the conference location and college campuses.

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**Lead Chaperone Name (Print)____________________ Phone number____________________**

Signature of Lead Chaperone____________________ Date____________________

**Additional Group Chaperones:**

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<thead>
<tr>
<th>Chaperone Name (Print)</th>
<th>Signature</th>
<th>Phone number</th>
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Please attach completed form to the Group Registration Form.