

Iconic.



May 2011

Dear Franklin County Conference Youth Participant:

By choosing to attend the Youth to Youth International's Conference, you've made a decision to REPRESENT your values and STAND for something. This is your chance to be an ICON. You'll learn leadership skills, meet new and exciting people, and experience inspiration that will be felt long after the four day conference ends! Congratulations on choosing to attend Youth to Youth International's "Iconic." Summer Training Conference 2011!

The conference agenda includes family groups (discussion groups that have made Y2Y Conferences famous!), workshops from professionals and high school peers, youth action groups, an original teambuilding challenge and tons of other activities. You'll hear presentations from some of America's top youth speakers. You'll hang out, swim, wind down, and dance the night away at three special evening events.

The best experience of your summer begins Saturday, June 18th, with registration from 11:45 am to 12:45 pm at the Harry C. Moores Campus Center, Capital University, Bexley, Ohio.

Please read this packet carefully and return all relevant forms by or before May 31, 2011. Forms can be downloaded off our website at www.youthtoyouth.net under "Conference Forms." Please select appropriate conference location (OH, CA or RI) and return those forms. If you have any questions, contact Cheryl at 614/586-7960 or Stephanie at 614/586-7959. You may also fax your questions to 614/675-3318 or e-mail ccampbell@youthtoyouth.net

See you at the Conference,

Cheryl Campbell
Program Director, Youth to Youth International

Parents: After the summer conference, all participants and their friends who will be in high school next year are invited to be a part of the year round Youth to Youth program by attending the weekly Youth Advisory Board meetings on Wednesday nights from 6-8pm at

our office. It's a great way to stay connected to positive friends, leadership opportunities and FUN all year. More information will be shared with your teen during the Conference.



Youth to Youth International's Conference

Participant Information

CONFERENCE

Capital University, Bexley, Ohio beginning Saturday June 18, 2011 at 11:45 A.M. and concludes Tuesday June 21st at 1:00 P.M. The closing ceremony will take place between 12:00 and 1:00 p.m. Please plan on attending the closing ceremony, since it is a very important part of the conference.

EMERGENCY PHONE CALLS

Beginning Thursday June 16th, the Youth to Youth office telephone numbers on site are: 614-236-7390 and 614-236-7359. For 24 hour emergencies, please call 614-236-6666.

REGISTRATION

The participant registration site is in the Harry C. Moores Campus Center. Directions to the Conference site can be found online at www.youthto youth.net closer to the time of the Conference. You may also consult the Capital University website (www.capital.edu) for more campus information or a more detailed look at the map. Participant registration hours are between 11:45 a.m. and 12:45 p.m. on Saturday June 18, 2011. You will sign-up for elective workshop sessions during the registration process. Room keys will be issued at this time. If the key is lost during the conference, or not returned at the conclusion of conference, you must cover the \$35 replacement fee.

REGISTRATION & CANCELLATION POLICY

A refund less \$35 processing fee per registration will be granted if a **request is received in writing by Monday May 27, 2011**. The cancellation notice must list each canceling participant's name. After this date, cancellations cannot occur, either in part or whole. Stop payment of a check or purchase order does not constitute a cancellation, and thus full payment of conference fees will be collected. **Participant substitutions will be accepted.**

MEDICAL

A nurse will be made available for routine minor first aid, if needed. Medical care is not available on campus. In the unlikely event of a major emergency, an emergency squad will be contacted and/or the participant will be transported to a nearby hospital. Parents or guardians will be notified immediately in the event of illness or an emergency. Participants are responsible for supplying and taking their own prescriptions or over-the-counter medicines (i.e., aspirin, Tylenol, cold preparations) if needed. No staff member, including the nurse, will dispense or distribute any medications or medical treatments. At registration,

please inform the nurse if you are taking medication or have a medical problem. Routine non-controlled prescriptions for a controlled substance (such as Ritalin for hyperactivity) will be kept locked in the nurses' station and the teen may obtain medicine for self-administration when needed from the nurse. If you have any questions regarding your child's eligibility due to physical limitations or medical problems, please contact us at least 2 weeks prior to your arrival.

RULES

Please make sure **both** participants and parent/guardians review all the conference rules contained in this information packet prior to **signing and returning** the rules form.

WHAT TO BRING

For your stay at Capital University, you will need to know the following about the dorms and what to bring.

YOU MUST bring your own sheets, pillows, blankets, towels, and any other linens necessary. They will NOT be provided for you. Unfortunately, the girls dorms are NOT air-conditioned, so participants will want to bring a fan!!!! All participants will be sharing a bathroom with up to 3 suitemates.

Cell phones and other electronic devices are not recommended. They can cause a disturbance and/or distraction to the conference. All use of cell phones which includes texting is prohibited during the conference. Exceptions are in your dorm, **before** lights out, or at meal times to parents. In case of emergency, participants and staff should be reached through the Youth to Youth office (this number is listed in this packet). All participants and staff should carry these items in a backpack, although we recommend not bringing them at all.

You will also want to bring the following: casual and comfortable clothing, camera (optional), pens/pencils, watch, alarm clock, and a key chain. **Bring a bathing suit and towel for the pool party!** Also, some activities may require physical activity, so bring tennis shoes. Bring some extra money for snacks at the evening events or to purchase promotional items and concessions. Do not bring valuable items! Youth to Youth is not responsible for lost or stolen items.

FUN EVENT INFORMATION

Day One: Enjoy your first night at conference with a LOT of H2O! "Make A Splash" at the pool party, with fun slides, the ever so popular diving board, and tons o' fun. You'll enjoy the poolside as well, with games and great music! Not to mention great times meeting lots of new friends! So don't forget to pack your bathing suit!!!!

Day Two: Let loose and spend a night on the town at the "Carnival Night" event. Enjoy some music and prepare to be entertained "carnival style" with the best people on the street-your Y2Y community! Food, music, special performances, body art, and more!

Day Three: Lights, Camera, Action! The stars are lining up and coming out for this exclusive Y2Y Hollywood Dance. The paparazzi will be out for this Hollywood themed affair under the stars, so make sure to dress to impress!

FREE-TIME

On Monday June 20, Youth to Youth will be giving conference participants 2 hours for dinner and free time, during which they can have a leisurely dinner and time to just hang out around campus. You can also choose to walk across the street into the town of Bexley and buy your own dinner or snack. Everyone will be required to check in from free-time/dinner at 7:10 p.m. Those not returning will be in violation of conference rules and may be subject to conference dismissal.

ELECTIVE SESSIONS: WORKSHOPS

Skill Building and Youth-Led Workshops at the Youth to Youth Conference are an educational and fun experience. At registration you will be required to sign up for workshops. It is recommended that participants from the same school or community sign-up for different sessions in order to gather a variety of ideas and information to bring back to their group.

CHECKLIST

All youth must return the following SIGNED forms:

- ★ Medical Information/Emergency Medical Release
- ★ Rules and Regulations

All forms must be returned by May 31, 2011 to:

Youth to Youth International's Conference

Attn: Stephanie Christie

547 E 11th Ave

Columbus, Ohio 43211

schristie@youthtoyouth.net

FAX: 614-675-3318

Youth to Youth International Conference

June 18-21, 2011

Medical Information Sheet

This form must be filled out and completed by the parent or legal guardian only. Please complete one form for each youth participant.

Name: _____ Age: _____ D.O.B.: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Country: _____

County: _____ School: _____ Sex: _____ Male _____ Female

Parent Email: _____ Youth Email: _____

T-Shirt size: _____ S _____ M _____ L _____ XL _____ XXL

Mother: _____ Phone: Home: () _____
Work: () _____ Cell: () _____

Father: _____ Phone: Home: () _____
Work: () _____ Cell: () _____

Legal Guardian: _____ Phone: Home: () _____
Work: () _____ Cell: () _____

Emergency Contact Person (other than above):

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Home () _____ Work: () _____ Cell: () _____

In case that person is unavailable, please contact:

Name: _____ Relationship: _____

Phone: Home () _____ Work: () _____ Cell: () _____

1. Does your child have any medical problems? _____ Yes _____ No
If yes, please describe in full: _____

2. Is your child currently on any medications? _____ Yes _____ No

If yes, list below with name of drug, dosage, and how often to be administered:

(over)

3. Name and phone number of physician who treats your child for above named medical problems:

Name: _____ Phone: _____
Name: _____ Phone: _____

4. Does your child have any allergies to any food or medication? _____ Yes _____ No

5. Does your child have any limitations? _____ Yes _____ No

If yes, please describe:

6. The nurse/staff may give my son/daughter Tylenol (1-2 tablets; every 4-6 hours, if needed, for headaches, cramps, etc.) _____ Yes _____ No

Family Health Insurance Information:

Family Health Insurance Company Phone Number

Policy Holder's Name Insurance Group # Policy ID #

_____ Please check if NO insurance

Emergency Medical Release

I _____ being the natural parent/legal guardian
of _____, who resides at _____,
hereby grant CompDrug/Youth to Youth, an Ohio,
not-for-profit corporation, or its designee the right to transport the above captioned minor to any emergency medical or
health care facility for immediate treatment and/or consultation, if necessary.

Further, I hereby grant CompDrug's medical director or his designee, the right to consent on behalf of the above-captioned minor medical treatment. I understand that I will be notified of any emergency situation as soon as reasonably practical, but that this Emergency Medical Release may be utilized in the event that I am unavailable to provide the necessary consent, and immediate authorization for treatment is required.

This release is effective for: Youth to Youth International's Conference: June 18-21, 2011.

Natural Parent/Legal Guardian For, _____
A Minor

Date: _____

**PLEASE COMPLETE & RETURN THIS PACKET BY May 31st TO:
Youth to Youth International's Conference Attn: Stephanie Christie
547 E 11th Ave Columbus, Ohio 43211
schristie@youthtoyouth.net**

Rules and Regulations Youth Participant

These rules are designed to ensure that all participants at Youth to Youth Conferences are traveling with Youth to Youth enjoy a maximum learning experience in an environment conducive to the exchange and sharing of ideas and concepts. All participants are expected to adhere to the rules as outlined herein, or may be established from time to time by Youth to Youth. **Any violation of these rules may result in immediate removal from the program or event. Enforcement and supervision of these rules shall be at the sole discretion and judgment of Youth to Youth.** Possible sanctions for rules violations may include, but shall not be limited to the following:

- ~ Private discussion with a member of the Youth to Youth staff, or,
 - ~ Removal from the program. All expenses or cost associated with the participant's removal from the program shall be the responsibility of the participant's parent or guardian.
1. **Attendance:** Your timely attendance and participation are required at all scheduled events. Failure to attend scheduled activities on time, without permission of the Conference Coordinator, creates supervision problems that will jeopardize your continued participation.
 2. **Behavior:** Participants are expected to conduct themselves in a mature and orderly manner at all times. Misconduct by anyone will not be tolerated.
 3. **Visitors:** Visitors are not permitted for reason of supervision, liability and contract with facility owners. Special emergency visitation must first be approved by the Conference Coordinator.
 4. **Remain on Grounds:** Participants are to remain on the grounds of the conference. If a participant needs to leave the grounds for any reason, prior approval must be given by the Conference Coordinator.
 5. **Use of Drugs or Alcohol:** Any participant either found using or under the influence of alcohol or other drugs, or in possession of alcohol, tobacco or other drugs, will be removed from the program. Smoking cigarettes is not permitted. Participants using prescription drugs for medical purposes shall notify the Conference Coordinator or Nurse in advance or at registration. Any person found with illegal substances or a weapon may be subject to criminal persecution.
 6. **Curfew:** Participants must be in their rooms at curfew and all their shower and bathroom needs should be completed at that time. Participants are expected to remain in their rooms for curfew until wake-up. Staff members reserve the right to conduct bed checks without notification any time during the program. Any unreasonable violation of curfew will result in removal from conference/trip.
 7. **Sexual Activity/Violence:** No sexual activity, acts of aggression or violence are permitted. Participants engaged in any of these may be subject to removal from the program. Parents/Legal Guardians will be responsible for transportation back to the original point of departure if their teen is removed from the conference/trip.
 8. **Sanitation:** All participants are expected to keep their room's neat and tidy at all times. Personal grooming is expected of all participants.
 9. **Electronic Devices:** All use of electronic devices **including cell phones**, MP3 players, iPods and portable DVD players are prohibited at conference except at night, in the dorm BEFORE lights out! Also, with cell phones, **texting** is prohibited throughout the conference except at night in the dorm BEFORE lights out.

As parent/guardian/participant, I have read the rules and regulations on this form and have discussed them with my parent/guardian/child. My parent/guardian/child understands all the rules and regulations and agrees, as do I, to abide by them. I agree to indemnify and hold the Youth to Youth program and its sponsoring organization CompDrug, as well as the local sponsor and any of their agents and employees harmless from and against all claims, damages, cause of action, or other liabilities caused by my violation of any of the rules and regulations contained in this agreement or established by Youth to Youth from time to time.

Furthermore, I understand that pictures and or videos of my child/me may be taken at the conference and hereby agree and consent to the use of these pictures/videos by Youth to Youth or its' sponsoring organization CompDrug for promotional or any other purpose.

Parent Guardian Name: _____

Signed: _____
A parent and/or guardian for

Date: _____

Name of Participant: _____
(Please print)

Date: _____

Participant Signature: _____

Date: _____

I give my permission for my child to complete Youth to Youth event evaluations. I also give permission for my child to participate in post-conference surveys and evaluation. I understand that data collected will be used for future program development.

Signed: _____

Date: _____