

# **20<sup>th</sup> Annual DISTRICT 50 YOUTH CONFERENCE**

*District 50 Middle and High School Students Only (Grades 6 through 12)*

Saturday, November 21, 2009, 8:15 a.m. – 8:15 p.m.

Sunday, November 22, 2009, 8:45 a.m. – 3:00 p.m.

*(Lock-In Event During These Hours - Students do not stay overnight)*

**RANUM HIGH SCHOOL**

**2401 W. 80<sup>TH</sup> AVENUE**

- ◆ Registration fee - \$10.00 (non-refundable). Checks made payable to Adams County School District 50
- ◆ Pre-Registration is Required – NO registration taken at door
- ◆ Registration deadline – Tuesday, November 10, 2009
- ◆ Registration is limited – Registrations taken on first-register basis
- ◆ Your conference confirmation and details will be mailed to you. If not received by November 19, 2009 call Westminster Area CAAT at 303-429-2228 (English, only).

## THE CONFERENCE IS A TWO-DAY EVENT

**Registrants must be in attendance for the full day (above hrs.) on both Saturday and Sunday**

**Leaving for a time and returning will not be allowed.**

### You Will:

- ◆ Make new friends and meet old friends.
- ◆ Begin to understand yourself and others.
- ◆ Have a lot of FUN!
- ◆ Discover why drugs are not for you!

### NOTE:

Current teen issues such as drug use, sexual issues, and violence may be addressed during this conference.

From: drugfreecommunity.com/mydrugfreeworld.com

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*Tear off and return this portion to your school's office with the \$10.00 registration fee attached.*

PLEASE PRINT:

Name \_\_\_\_\_  
Female \_\_\_\_\_ Male \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Grade \_\_\_\_\_

School \_\_\_\_\_

T-Shirt(Adult Sizes) \_\_\_Sm \_\_\_Med \_\_\_Lg \_\_\_XL

May we publish your name and phone number in a  
Conference Roster to be distributed to Conference  
Participants?

\_\_\_\_\_ Yes \_\_\_\_\_ No

*(If "No" or nothing is marked, only the name will appear)*

Please note any special needs, dietary needs,  
handicaps, allergies, medication administered or  
other medical conditions.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY CONTACT**

Name \_\_\_\_\_  
Relationship to Participant \_\_\_\_\_  
Phone No. \_\_\_\_\_

PERMISSION TO ATTEND, MEDICAL AND PHOTO  
RELEASES FOR \_\_\_\_\_

(Applicant)

I hereby grant permission for the above named minor  
to participate in the District 50 Youth Conference on  
November 21 and 22, 2009. I understand that current teen  
issues such as drug use, sexual issues and violence may be  
addressed during this conference.

I grant to Adams County School District 50 the right to  
transport the above named minor to an emergency medical  
or health care facility, and the right to consent on behalf of  
minor for medical treatment. I understand that the  
emergency contacts listed below will be contacted first and  
in the event that they are unavailable and immediate  
authorization for treatment is required, this release will be  
invoked.

I further understand that the above named minor may be  
photographed by the conference staff photographer or  
press as a participant. I understand that my child's  
appearance in the tape or any photographs for use and  
distributed is consented to without restriction or  
expectation. If "yes" is marked on this application, I  
agree that my child's phone number may be published in  
Conference Roster that will be distributed to participants.

This release is in effect for Saturday, November 21 and  
Sunday, November 22, 2009 for the District 50 Youth  
Conference at Ranum High School.

\_\_\_\_\_  
(Parent/Guardian Signature) \_\_\_\_\_ Date

Relationship to Minor \_\_\_\_\_