Public Safety & Native Wellness Conference
April 18, 2011
8:30am-7:00pm
Viejas Recreation Center

Featuring: Youth and Parent Workshops, Keynote Speakers, Cultural Activities, Juvenile Justice System Info, Positive Life Skills, Networking & FUN!

Who should attend: Native Youth (ages 12 and older), Parents, Chaperones & Tribal Community Members

Breakfast, Lunch & Deep Pit BBQ Dinner will be provided!!

Contact Info: Brenda Montero at (619) 659-2357, fax (619) 659-9377
Email: bmontero@viejas.com
Mercedes Elliot (619) 922-4292
Email: sadiebuggs_1@yahoo.com

The V-STARS
(Standing Tall As Resilient Sisters)
Youth Group would like you to attend...

“Be The Change”

Schedule:
8:30-9:00
Registration/Continental Breakfast (provided)

Opening:
9:00-9:20
Blessing/Keynote

Session I:
9:30-10:10

Session II:
10:15-10:55

Session III:
11:00-11:40

Session IV:
11:45-12:25

Lunch: 12:30-1:45
Lunch provided
Native Comedian Drew Lacappa

Smart Start Presentation:
2:00-2:55

MADD Presentation:
3:00-3:55

Group Games (Relays, Tug of War, etc.):
4:00-5:00

Blessing/Deep pit BBQ Dinner: 5pm

Birdsongs/Dance (Open to all): 5:30-7:00

Co-sponsors

The V-STARS (Standing Tall As Resilient Sisters) Youth Group would like you to attend…
The Viejas V-STARS invite you to attend...

Career & College Fair

April 18, 2011

12:30-1:45 & 3:30-7:00pm

At the Viejas Recreation Center

Agreement, Waiver, and Release:

In consideration for being permitted by the Viejas Band to participate in the event noted below, I hereby waive, release, and discharge any and all claims for damages for loss, personal injury, death, or property damage which I may have as a result of participation in said event. I understand that this event involves an element of risk and danger of accidents, and knowing the risks, I hereby assume the risks. I agree to indemnify and to hold the Viejas Band and the above persons or entities free and harmless from any loss, liability, damage, cost, or expense which may occur as the result of any injury or property damage that I may sustain while participating in the said event.

Parent's/Guardian's Consent:

Public Safety & Native Wellness Conference, April 18, 2011, 8:30am-7:00pm

(To be completed and signed by parent or guardian if applicant is under 18 years of age.)

Participant’s name:____________________________________

Age:_________ Address:__________________________________

Home # (_____)_____________________________________

Cell # (_____)_____________________________________

Emergency Contact:___________________________________

Phone # (_____)_____________________________________

Family Doctor:________________________________________

Office # (_____)_____________________________________

List of Medical Conditions, Allergies, Medications, etc:

_____________________________________________________

_____________________________________________________

I hereby authorize any necessary emergency medical treatment and hospital care deemed advisable by any properly licensed physician, dentist, and/or surgeon.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND THE VIEJAS BAND AND I SIGN IT KNOWINGLY AND VOLUNTARILY.

X_____________________________ Date X_____________________________ Date

Participant signature Date Parent/guardian signature Date

I hereby authorize any necessary emergency medical treatment and hospital care deemed advisable by any properly licensed physician, dentist, and/or surgeon.

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X_____________________________ Date X_____________________________ Date

Participant signature Date Parent/guardian signature Date