

**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

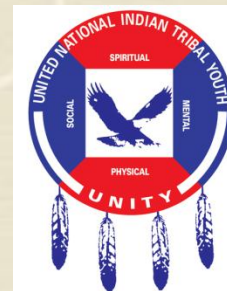
Group Games (Relays, Tug of War, etc.):

4:00-5:00

Blessing/Deep pit BBQ Dinner: 5pm

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

**Co-sponsors**



Contact Info: Brenda Montero at

(619) 659-2357, fax (619) 659-9377

Email: [bmontero@viejas.com](mailto:bmontero@viejas.com)

Mercedes Elliot (619) 922-4292

Email: [sadiebuggs\\_1@yahoo.com](mailto:sadiebuggs_1@yahoo.com)

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

**"Be The Change"**

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!!**

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 \_\_\_\_\_ X \_\_\_\_\_

Participant signature

Date

Parent/guardian signature

Date