"Dancing With Our Communities to the Beat of Our Own Drum" NCNAYO 33rd ANNUAL INDIAN YOUTH UNITY CONFERENCE APPLICATION

NAME:		TELEPHO	NE:	
ADDRESS:				
(Street)	(City)	(State)	(Zip Code)	
DATE OF BIRTH:/ SC	CHOOL:		GRADE:	
MOTHER'S NAME:		TELEPHO	NE:	
MOTHER'S WORK PHONE #:		FATHER'	S WORK #:	
FATHER'S NAME:	TELEPHO	_TELEPHONE:		
The information below is needed for statisti	cal purposes only:			
TRIBE:		SEX:		
TRIBAL AFFILIATION(S):				
ROOMMATE PREFERENCE: (no roomm	nate assignments a	re guaranteed)		
Please indicate your workshop choices in or provided. Every effort will be made to how subject to change due to the availably of	rder of preference or at least two of y	by numbering 1	1-5 (for each column) in the spaces	
(Day 2)		(Da	ay 3)	
North Carolina Tribal History Leadership Development (full-day) Powwow Dancing/Regalia Construction Native Drumming Healthy Eating/Lifestyles Youth Rap Session HIV/AIDS Awareness Native American Spirituality		Safe Driving/I College Life Academic Prep Financial Liter Preparing for C Careers with the	pes/Assessment Driving While Distracted Prevention Dractions for College Dracy/Entrepreneurship Dracers in Medicine Drace Secret Service Drace Service Drace Service Drace Service Drace Service Drace Service Drace Service	
Why would you like to attend this year's co	onference? PLEAS	SE EXPLAIN:		

Office of	Are you interested in running for a N.C	C. Native American Youth Organization	on Executive Office?
I agree to give my full participation in all sessions and activities of the N.C. Native American Youth Organization Conference and pledge to conduct myself in a manner that will bring only credit to American Indians. In the event of an accident or injury, I will not hold the N.C. Native American Youth Organization or any of its agents, volunteers or other organizations involved in this conference liable. I also agree to pay for any damages I may incur or associated with the room to which I am assigned. The use of tobacco, alcohol or other drugs at the conference or other conduct unbecoming of a conference participant will result in my immediate dismissal from the conference. Student Signature Date I hereby approve the participation of my son/daughter in the N.C. Native American Youth Organization Conference. In the event of illness or accident, I give my consent to do any acts that may be necessary or proper to provide for the health care of the minor child. Also, I hereby release and agree to hold harmless the State of North Carolina and its employees, agents, and officers of the North Carolina Native American Youth Organization and any of its agents, volunteers, or other organizations involved in this conference from any and all claims, including those of our heirs or assigns which may inserfrom any action or failure to act by any employee, officer, or agent of the State of North Carolina or the N.C. Native American Youth Organization in connection with the participation of our (my) child (PLEASE ENTER CHILD'S NAME ON LINE PROVIDED) in the North Carolina Indian Youth Unity Conference. I also agree to pay for any damages that may be incurred by my child. Parent/Guardian Signature Date Chaperone's Name: Chaperone's Name: Chaperone's Signature: If you are not selected to be a participant, your money will be refunded. No refunds for cancellations will be given after June 5, 2012. If you are paying for yourself, send your check to the group you will be coming with and they will pay your fee with the rest			
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Amount Enclosed: T-shirt Size:	after June 5, 2012. If you are paying f will pay your fee with the rest of the gr	for yourself, send your check to the group from your area. <i>The deadline fo</i>	roup you will be coming with and they
	Amount Enclosed:	T-shirt Siz	ze:

Mail registration and other conference materials to:

N.C. Indian Youth Unity Conference Coordinator P.O. Box 25811 Raleigh, NC 27611-5811

Parent/Guardian

I hereby approve the participation of my son/daughter in the N.C. Native American Youth Organization Conference. In the event of illness/injury, I give consent to do any act which may be necessary or proper to provide for health care of my minor child. In doing this, I agree to relinquish the state of North Carolina and/or its employees and agencies from any claims from participation in the North Carolina Indian Youth Unity Conference.

Should any damages occur, I and/or my son/daughter would accept full responsibility for the cost of repairs/replacements of goods damaged. I am fully aware that the N.C. Commission of Indian Affairs or any of its agents or programs therein, will not be held accountable for damages or injuries that my child may incur.

I am aware that my son/daughter will be chaperoned by appropriate adult authorities and agree to give them permission for direct supervision of my son/daughter. Should my child behave in inappropriate and/or unethical practices, I am aware that it is my obligation to pick up my child immediately from the conference. I am also aware that improper behavior might lead to the dismissal of my son/daughter from the conference events, as well as NCNAYO events therein.

Should my son/daughter provide his/her own transportation to the Indian Youth Unity Conference, they will be instructed to release their keys to the appropriate authority, be it chaperons or the conference administrator. I am also aware that the N.C. Commission of Indian Affairs will not be held liable for any injuries or accidents by way of transportation or other measures which may incur on the way to the conference or thereafter.

_	Parent/Guardian Signature	Date	
I can be reached at these numbers:			
	Day	Night	

The N.C. Commission of Indian Affairs (Commission) staff provides advice to the N.C. Native American Youth Organization (NCNAYO) officers and members in terms of conference planning. However, the N.C. Indian Youth Unity Conference is not a State sponsored event. The Commission is not liable for any expenses or liability associated with the NCNAYO conference. Information shared by the Commission regarding the N.C. Indian Youth Unity Conference was prepared by the N.C. Native American Youth Organization. The information contained in it does not reflect the views and opinions of the State of North Carolina.

NORTH CAROLINA NATIVE AMERICAN YOUTH CONFERENCE

Wesleyan College Rocky Mount, NC June 13 - 16, 2012

Please complete the questions that apply and return with the registration. FORM MUST BE NOTARIZED.

AUTHORIZATION TO CONSENT TO HEALTH CARE FOR MINOR & STUDENT 18 AND OLDER

Ι,	, of		County,	, am the custodia	l parent having leg	gal custody
of	,	a minor	child, age _	, born	, 19	_, OR I,
staff, in whose care I am or the minor which may be necessary or proper to power (i) to provide for such health or other person whose services may including administration of anesthes dentists, and other medical personnel	r child has be o provide for care at any ho be needed ia, X-ray exa	the health ospital or of for such hamination,	ted, located at 11 n care of the min other institution, nealth care, and performance of	6 West Jones Street, nor child or me, incl or the employing of (ii) to consent to an f operations, and oth	Raleigh, N.C., to ouding, but not lim any physician, der nd authorize any her procedures by	do any acts ited to, the ntist, nurse, nealth care,
This consent shall be effective from the	ne date of exe	ecution to	and including Ju	ne 13-16. 2012.		
By signing here, I indicate that I have informed as to the contents of this doc		_				-
Please indicate any need that require	res special a	rangeme	nts/accommoda	tions (i.e. allergies o	r other conditions	s):
Please check if special meals are requ	ired due to al	lergies: _				
Hospitalization Insurance Company/F	rovider –	Н	ospitalization Ins	surance Policy/Provid	ler/Medicaid	
(SEAL)					
Custodial Parent			Date			
(SEAL)					
Participant's Signature (if 18 or older)	<u> </u>		Date			
STATE OF NORTH CAROLINA						
COUNTY OF						
On this day of,, know and known to me to be the personant the statements in the foregoing instruction.	personally apson described ment are true	ppeared be in and w	fore me the person the executed the	on named, same and being duly	sworn by me, mad	, to me le oath that
					Notary Public	

NORTH CAROLINA NATIVE AMERICAN YOUTH CONFERENCE

Wesleyan College Rocky Mount, NC June 13 - 16, 2012

RULES OF CONDUCT

(MUST BE SIGNED BY PARTICIPANT)

WHEREAS, the NCNAYO Code of Ethics prohibits possession and/or use of alcoholic beverages, tobacco, and illegal drugs, or remaining in the presence of individuals who are using or taking illegal drugs; and

WHEREAS, sexual contact at any event or activity occurring within the time frame for the conference is prohibited; and

WHEREAS, any behavior that violates any of the laws of the United States or the State of North Carolina or any local ordinance is also prohibited; and

WHEREAS, the attendance and punctuality of scheduled meetings of the NCNAYO Youth Conference is considered mandatory by all participants; and

WHEREAS, any student driving their own vehicle will be required to give the keys to the NCNAYO Conference Coordinator for the duration of the Conference, and

WHEREAS, the NCNAYO Code of Ethics demands that all participants conduct themselves in a manner representative of American Indian youth, including showing respect for the property of others and the facility in which the Youth Conference is held.

WHEREAS, NCNAYO requires that all participants dress in a manner that is reflective of the American Indian culture and is comparable to the **dress code requirements** at the participant's school. No skirts or dresses are to be worn at the dance. If your religion prevents you from wearing shorts/jeans, you may refrain from the dance or agree to wear shorts under your dress or skirt.

determined that making this det	te Code will result t I have violated th termination is vested	outh Conference Code of Ethics and a in my parent(s) being notified. In the Code, I may be sent home. The d in the Director of the North Carolin Search Director or her designee.	am aware that any he event that it is responsibility for na Commission of		
This the	day of	, 2012.			
(Participant's Signature)					