

Leadership Development Training

April 1-3, from 7 PM Friday to 2 PM Monday

Site: Unitarian Universalist Church of Berkeley! 1 Lawson Road, Kensington CA

Who may attend?

Youth between the ages of **14** and **24**. **Adult Advisors 25+**

What is the cost of registration? PCD Conferences are \$50. If youth register late, there is a \$10 late fee. If youth register the Wednesday before the Con, that youth will not be guaranteed a spot. Checks should be made out to PCD YRUU. Scholarships are available on a first-come first-serve basis. Please contact our registrar if you need one! *New conferees will receive 50% off the registration price.*

How do I register? Contact ldc@pcdyruu.org. Then bring a signed and completed registration form to the con, along with your registration fee and a copy

of the **covenant**. *No walk-in registrations will be accepted. Please contact us before the registration deadline.* Anyone registering after the registration deadline will be charged a late fee of \$10.

What is a TRAINING? Conferences and trainings are always safe place for us as youth in our community to celebrate Unitarian Universalism, ourselves, and our diversity in a fun and spiritual weekend. The District's Youth Council plans four standard conferences throughout the year. **This is a training, not a normal conference. The weekend's activities are focused on learning leadership skills applicable in PCD YRUU, at your home church, and out in the world. Trainings are substantially more focused than a conference, although we like to think they're still fun.** We stay in a church for the weekend playing games, learning about social action issues, deepening our Unitarian faith, and hanging out with great friends. Since we believe strongly in youth empowerment, conferences are youth-planned and youth-led. We keep a strict youth-adult ratio of 10:1

Conference Rules:

Please no violence or drug use.

Sexuality is a healthy part of the lives of youth, however, we discourage exclusive relationships or sexual behavior at conferences.

Youth may not leave the conference site without prior arrangements.

Discrimination based on age, sex, gender, orientation, religion, political party, physical capability, or anything else is not permitted at PCD YRUU conferences.

Breaking any of these rules may result in being asked to leave the conference immediately at your expense

What to bring:

Full stomach (No Friday dinner served)

Weather appropriate clothing

Pajamas

Deodorant

Toiletries

Sleeping bag and pillow

What not to bring:

Drugs or drug paraphernalia

Weapons

Pets or unregistered friends

LDT Registration

Name _____ Birth Date ____ / ____ / ____

Age _____

Vegetarian ____ Vegan ____ Omnivore ____ Other (please specify) _____

Phone # _____ - _____ - _____ Emergency Phone # _____ - _____ - _____

Mailing Address _____

City _____ State ____ Zip Code _____ E-mail _____

Health insurance carrier and # _____

I, _____, will be an attendee at **2011 Leadership Development Training** , in **Kensington, CA** from **April 1-3**.

I understand all of the conference rules and I will abide by them throughout the conference. I understand that PCD YRUU is in the process of filming a documentary, and that my image, voice, name, or likeness may be recorded at any or all PCD YRUU events. By signing this form I give PCD YRUU Youth Council permission to use such material as they see fit. In addition, I certify that all the information stated on my registration form is true and complete to the best of my knowledge.

Attendee Signature _____ Date _____

My child, _____, will be an attendee at **2011 Leadership Development Training** , in **Kensington, CA** from **April 1-3**. I understand all of the conference rules and have discussed them with my child. I understand that breaking these rules may result in my child being asked to leave at my personal expense. I understand that PCD YRUU is in the process of filming a documentary, and that my child's image, voice, name, or likeness may be recorded at any or all PCD YRUU events. By signing this form I give PCD YRUU Youth Council permission to use such material as they see fit. In addition, I certify that all the information stated on my registration form is true and complete to the best of my knowledge.

Parent or Guardian Signature _____ Date _____

I would like to donate \$_____ to help bring PCD YRUUers from Hawaii and other far reaches of our district to our events.

I DO NOT consent to allowing my photo to appear on the PCD YRUU website.

I would NOT like to receive PCD YRUU Conference information by email.

I would NOT like to be identified by name in the DoCONumentary project.

I would LIKE to receive PCD YRUU Conference information by PAPER MAIL, OR would like to continue using paper mail for information.

Other Medical info:

Current medications: _____

Allergies/ medical conditions: _____

Date of last tetanus shot: __/__/__

Special health needs: _____

OTHER CONCERNS: