



The 2005 National Youth Summit
Youth in Action – Making a Difference

July 28 – 30, 2005
Marriott Wardman Park Hotel
Washington, DC

Mail or fax this form by July 11, 2005 * Or register online at www.ncfy.com
(After July 11, 2005, all registration will be onsite.)

REGISTRATION FORM

Name: *(First, MI, Last)* _____

Address where you would like to receive mail regarding the Summit:

Street: _____

City, State: _____ Zip: _____

Phone: () _____

Fax: () _____

E-mail: _____

Age:

(As of July 28, 2005)

- Under 18 (You must submit a signed Parental/Guardian Consent Form and identify your adviser here.) **Name of adviser:** _____
- 18 – 20
- 21 or older

How would you describe yourself?

(Check all that apply.)

- | | |
|--|---|
| <input type="checkbox"/> I am a high school student. | <input type="checkbox"/> I legislate youth issues. |
| <input type="checkbox"/> I am a college student. | <input type="checkbox"/> I manage/administer youth programs. |
| <input type="checkbox"/> I am a youth who is active in my community. | <input type="checkbox"/> I am a youth worker/teacher. |
| <input type="checkbox"/> I am a youth looking for ways to become involved in my community. | <input type="checkbox"/> I am a speaker/presenter at the Summit. |
| <input type="checkbox"/> I advocate on behalf of youth. | <input type="checkbox"/> This is my first time attending the National Youth Summit. |
| | <input type="checkbox"/> I have attended a previous National Youth Summit. |

Do you attend a program at a:

(Check all that apply.)

- Community-Based Organization
- Faith-Based Organization
- Government Agency
- School or Educational Institution
- Other _____

Do you work for:

(Check all that apply.)

- Community-Based Organization
- Faith-Based Organization
- Government Agency
- School or Educational Institution
- Other _____

Volunteer Activities:

- | | |
|--|---|
| <input type="checkbox"/> Mentor (after school or work, etc.) | <input type="checkbox"/> Planner/Consultant (assist programs & projects, etc.) |
| <input type="checkbox"/> Community Service (food banks, park clean-up, etc.) | <input type="checkbox"/> Civic Action (speak at public forums, petition drives, etc.) |
| <input type="checkbox"/> Other _____ | |

Name of the Organization/Agency you are representing at the Summit:

For Advisers: Please provide the names of the youth who you will be advising while at the National Youth Summit.
(Limit 8 youth per adviser)

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Special Needs: Please briefly describe any accessibility, dietary, or other special needs. _____

Hotel Arrangements

Summit participants are responsible for making their own hotel reservations. To make a reservation, contact the Marriott Wardman Park Hotel at 1 (888) 236-2427 or online at www.stayatmarriott.com/2005NationalYouthSummit. When making a reservation, mention the National Youth Summit for a special discounted rate. Rooms will be held for Summit participants through July 6, 2005. If you have questions, see Hotel/Travel Info on the Summit Web site at www.ncfy.com.

Registration Fee: \$125

The fee includes a complete Summit registration packet, a welcome reception, access to all workshops and special sessions, three breakfasts, two luncheons, two dinners, and all refreshment breaks.

To register online at www.ncfy.com, you must provide a credit card number. To pay by check, please make check payable to "National Clearinghouse on Families & Youth," and mail it along with this form to the address below. Include registrant name(s) on your check or money order. Payment must accompany registration form.

Please note: Payment must be received by July 11, 2005. After July 11, all registration will be onsite.

Credit card will be charged \$_____ for _____ (# of people) attending the National Youth Summit.

Credit Card # _____ Exp. Date _____

Cancellation and Refund Policy

Due to the nature of this event, all refund requests must be received no later than 48 hours before the start of the Summit. Requests will be reviewed on an individual basis, and all refunds will be charged a \$25 administrative fee.

For all youth and advisers: (Please check)

I have read the Youth/Adviser Information Packet and verify that I understand my responsibilities as a youth participant or youth adviser at the National Youth Summit.

For all Summit participants: (Please check)

You have my permission to use any photographs taken of me and/or anecdotes I provide related to my experience in Summit activities for possible use in Summit-related materials

For youth under age 18:

You must have your parent/guardian read and sign the Parental/Guardian Consent Form and **return to us by mail or fax no later than July 11. Your registration will not be processed without a signed Consent Form.**

Please return all signed forms to NCFY. Fax to (301) 608-8721 or mail to National Youth Summit, c/o NCFY, P.O. Box 13505, Silver Spring, MD 20911-3505.