

ACTIVATE

The Global Justice Youth Conference

Student Consent & Participation Form

Student Delegate Information:

Name: _____ Any additional information that the conference organizers should know (i.e. special dietary requirements or sensitivities, allergies, medical alerts, etc): _____

Grade: _____ Gender: Female Male

Phone Number: _____

Email Address: _____

School: _____

Teacher's Name: _____

Workshop Preferences:

Please indicate your TOP 2 PREFERENCES in each group so that we know which ones you want to participate in the most. (Please note that workshops are subject to change without notice, and that you are not guaranteed your preferred topic.)

Session 1 - Reflective Workshop Topic	
<input type="radio"/> Anti-Oppression & Anti-Racism <input type="radio"/> Examining Power & Privilege <input type="radio"/> Charity & Justice	
Session 2 - Creative Skills & Information Workshops Block A <input type="radio"/> Invisible Theatre <input type="radio"/> Human Rights <input type="radio"/> Millennium Development Goals <input type="radio"/> Refugee Rights <input type="radio"/> Music for Social Change <input type="radio"/> Food <input type="radio"/> Silkscreening	Session 2 - Creative Skills & Information Workshops Block A <input type="radio"/> Deconstructing Food <input type="radio"/> Spoken Word <input type="radio"/> Gender Trafficking <input type="radio"/> Digital Video Creation <input type="radio"/> Zine Creation <input type="radio"/> Button Making
REGISTRATION DEADLINE: See Teacher Registration Form <i>teacher registration, student consent forms, and payment due before registration complete</i> REGISTRATION FEE: \$10 per student until June 24th, 2013, \$15 after June 24th, 2013 <i>Please make cheques payable to SCIC and give them to your teacher for collection</i>	

Parental Consent and Media Release:

I (parent/guardian), _____, give permission for (student delegate) _____, a student at (name of school) _____

to be absent from classes for one day in order to attend SCIC's

Activate! Global Justice Youth Conference. I understand that SCIC will not provide transportation to or from the conference.

I agree that the delegate may be interviewed/photographed/videotaped by the media or by the conference host, the Saskatchewan Council for International Cooperation (SCIC). I waive all personal rights and objections to the use of these materials in connection with any reproduction, communication of images, footage or recordings for exclusive use of SCIC and its partners.

Parent Signature _____ Date _____

Teacher Signature _____ Date _____



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