

SAVE THESE DATES! REGISTER EARLY!



Take Charge of Your Journey!

2016 Michigan Teen Conference

Tuesday-Wednesday, June 21-22, 2016 at

EASTERN
MICHIGAN UNIVERSITY
Education First
Ypsilanti, MI 48197

Promote this event with foster youth ages 14-21!



Find the conference on Facebook:

<https://www.facebook.com/MichiganTeenConference>



and Twitter:

<https://twitter.com/MiTeenConf>

Details at www.michfed.org after April 1, 2016.

EARLY SPONSORS INCLUDE:

Fostering Success Michigan

Lutheran Social Services of Michigan

Michigan Department of Health and Human Services-Youth In Transition

Michigan Federation for Children & Families

Eastern Michigan University

2016 Michigan Teen Conference

Take Charge of Your Journey!

Do you know a youth in Foster Care or Independent Living or Young Adult Voluntary Foster Care who needs to learn about money management, employment, educational opportunities, health and wellness, or housing? If you do, then help them pre-register for the **2016 Michigan Teen Conference**.

Youth must be ages 14 to 21 and in Foster Care or Independent Living or Young Adult Voluntary Foster Care. If attendees are under the age of 18, a chaperone **MUST** attend the conference with them and accompany them at all times. Caretakers of the youth and professionals who work with teens are also invited. Attendees will sharpen their understanding of what is available and required for foster youth to make the challenging transition to adult life.

The complete program for this event will be issued in early April 2016.

Based on experience, you know it will be outstanding!

In other words...it is not too early to register!

Preliminary Schedule (subject to updates)		
Mon., June 20	5:00 PM – 6:00 PM	Dinner available
	6:00 PM – 8:00 PM	Early check-in for residence hall
	6:00 PM – 8:00 PM	Early check-in for conference
	6:00 PM – 10:00 PM	Recreation/entertainment options
Tues., June 21	7:00 – 8:30 AM	Breakfast
	9:00 AM – 10:30 AM	Early check-in for residence hall
	9:00 AM – 10:30 AM	Early check-in for conference
	10:30 AM – 12:00 PM	Opening remarks & keynote
	12:00 – 1:00 PM	Lunch
	1:00 – 2:00 PM	Workshops A
	2:00 – 2:15 PM	Break
	2:15 – 3:15 PM	General session
	3:30 – 4:45 PM	Eastern Michigan University campus tour
	5:00 – 6:00 PM	Dinner
7:00 PM – 8:00 PM	Workshops B	
6:00 – 10:00 PM	Recreation/entertainment options	
Wed. June 22	7:00 – 9:00 AM	Breakfast
	7:30 AM – 9:00 AM	Check-out for Residence Hall
	9:15 – 10:30 AM	General session
	10:30 – 10:45 AM	Break
	10:45 – 11:45 AM	Workshops C
	12:00 – 1:00 PM	Box lunch
	1:00 – 3:00 PM	Walk through Life
3:00 – 4:00 PM	Closing and prizes	

What attendees have said about the Michigan Teen Conference:

“Everything was spot on!”

“Inspiring.”

“I like this, I would love to come again.”

What I liked best about the conference:

Talking to people who want to help us
Meeting other kids • Variety of speakers
Useful information • Everything • Activities

Workshops will feature topics such as:

- Anti-bullying/Ok to Say
- Financial aid
- Getting ready for college
- Healthy relationships/Teen Voice
- Job readiness/search/employment
- MYOI
- Resources for older youth (ETV, Fostering Futures scholarship, YIT, YAVFC)
- Skilled trades
- Telling your story

In addition, a special **Walk Through Life** will feature numerous life stations to visit and resources to grab at this fun, interactive two-hour session. It is a chance for youth to put into practice many of the life skills they acquired during the conference. Stations will include:

- Education
- Employment
- Finances
- Housing
- Identification
- Transportation

Full details to be issued in April.



Find the conference on Facebook!

<https://www.facebook.com/MichiganTeenConference>



and Twitter:
<https://twitter.com/MiTeenConf>

Frequently asked questions

Do I need a chaperone? All youth under the age of 18 must have a chaperone at all times, including overnight. A minimum of one adult chaperone to three youth is required throughout the conference. Dorm rooms sleep up to four individuals; therefore, same-sex chaperones will be needed. Chaperones must be identified on the registration form.

What is a chaperone responsible for? One chaperone is required for up to three youth under age 18 attending the conference, and a signed agreement for each chaperone attending must be submitted with the registration. The agreement form is provided with this brochure and explains the chaperone's responsibilities throughout the conference. One chaperone per form; copy as needed.

Do I need to sign a consent form? Yes, a signed consent form for each youth attending must be submitted with the registration. The consent form is provided with this brochure; one youth per form; copy as needed.

How much does it cost to attend? The registration fee is \$135 for each registrant and includes: all workshop materials; dinner and evening activities on Monday; breakfast, lunch, dinner and evening activities on Tuesday; and breakfast and lunch on Wednesday. Fees must be paid prior to attending the conference. **Overnight room charges** are in addition to the registration fee (see separate question). Registrations submitted after May 30, 2016, require an additional \$25 per person.

Are there funding sources that can help pay for my registration? Very likely! Here are some options that your worker may be able to access:

- ▶ County **Youth In Transition (YIT)** funds CAN be used to pay for youth to attend the conference. Additionally, YIT funds can be used for chaperone's travel costs only—mileage, meals (\$90 of the \$135 fee is for meals) and overnight room. YIT funds CANNOT be used for chaperone's cost of registration for the conference (\$45 of the \$135 fee). YIT funds can be accessed through the local DHHS foster care worker.
- ▶ This conference is an **Approved Asset Training**, thus, county **Michigan Youth Opportunities Initiative (MYOI)** funding CAN be used to pay for youth to attend the conference. If your county has MYOI, consult your MYOI Coordinator for funds.
- ▶ If youth are not eligible for YIT or MYOI funding, workers are encouraged to assist youth in raising funds to cover their cost of attending.

Where do I sleep? Overnight accommodations will be available in on-campus dorm rooms for youth and their chaperones. Bring an alarm clock, fan and toiletries. Linens and towels are provided. Alternatively, **off-site hotel locations are available nearby at participants' own expense** (see inset for suggestions). See Registration Form for dorm room costs.



If you have trouble locating funding for your youth to attend, please contact Laura Mitchell at LSSM:
Lmitc@LSSM.org
(616) 356-1934



What if I have to cancel my registration? All cancellations must be submitted in writing. Those received and verified on or before June 1, 2016, will be refunded, less a \$25 fee. No refunds will be issued after June 1, 2016. If you are unable to attend, please notify LSSM in Grand Rapids—(616) 356-1934 or (800) 886-5776—if you will send someone in your place.

Am I liable for any damages I may cause? By registering to attend the conference, you are agreeing to be financially responsible for any damages incurred by yourself to any portion of the facilities in use by the conference. You are also agreeing to be responsible for abiding by EMU campus rules and local laws for the duration of the conference.

Area hotels It is highly recommended that youth and their chaperone stay in the dorm on campus so youth can experience college campus living. Overnight expenses for youth and chaperones off-campus are not eligible for YIT funding.

IMPORTANT: Youth and chaperones are expected to stay together in the same overnight room.

If you prefer overnight accommodations in a nearby hotel, below are options nearest EMU. Reservations and payment must be made directly with the hotel. Reserve your room early to assure space is available (tax is additional). **Full payment for hotel is the responsibility of the person/group. No hotel charges will be paid by the conference.**

Information coming soon.

Sponsor Form

2016 Michigan Teen Conference
Take Charge of Your Journey!



The **Michigan Teen Conference** is offering the opportunity for businesses, programs and individuals to support teens as they prepare to exit foster care and become successful adults! As a sponsor, you will have the opportunity to promote your business and let your community know how **youth-friendly** your services are.

Please consider which sponsor option(s) best suit your idea of promotional interests through this gesture of support. **If you have questions or another idea for sponsorship, please contact Conference Planning Committee Co-Chair Laura Mitchell. She can be reached at Imitc@LSSM.org; (616) 356-1934.**

Organization/company name:
Contact person:
Title:
Mailing address:
Phone:
Fax:
Email:
Website:

PAYMENT FOR SPONSORSHIP is due by April 30, 2016.

- Check enclosed for total amount due.
- Check will be mailed for total amount due.

All sponsors must provide camera-ready artwork (logo) in hi-resolution digital format (jpg, pdf, eps, gif or tiff) no later than **April 30, 2016**. Email the file to Laura Mitchell, Imitc@LSSM.org.

Sponsor selection (check all that apply):

<input type="checkbox"/>	Keynote – \$1,000 - \$4,000 The KEYNOTE SPONSORS will receive: <ul style="list-style-type: none"> ■ Recognition in printed materials and signage. ■ Opportunity to provide sponsor's pre-printed material (brochures, coupons, etc.) for conference bags.
<input type="checkbox"/>	General Session – \$500 The KEYNOTE SPONSOR will receive: <ul style="list-style-type: none"> ■ Recognition in printed materials and signage. ■ Opportunity to provide sponsor's pre-printed material (brochures, coupons, etc.) for conference bags.
<input type="checkbox"/>	Flash Drive – \$1,000 Each FLASH DRIVE SPONSOR will receive: <ul style="list-style-type: none"> ■ Recognition in printed materials and signage.
<input type="checkbox"/>	Conference T-Shirt – \$750 Each CONFERENCE T-SHIRT SPONSOR will receive: <ul style="list-style-type: none"> ■ Recognition in printed materials and signage.
<input type="checkbox"/>	Water Bottle – \$750 The WATER BOTTLE SPONSOR will receive: <ul style="list-style-type: none"> ■ Recognition in printed materials and signage.
<input type="checkbox"/>	Conference Bag – \$500 The CONFERENCE BAG SPONSOR will receive: <ul style="list-style-type: none"> ■ Recognition in printed materials and signage.
<input type="checkbox"/>	Financial Donation Sponsor in the amount of \$ <input type="text"/> Each CONFERENCE FINANCIAL SPONSOR will receive: <ul style="list-style-type: none"> ■ Recognition in printed materials and signage.
<input type="checkbox"/>	Prize – \$150 or item =/+ value Each PRIZE SPONSOR will receive: <ul style="list-style-type: none"> ■ Recognition in printed materials and signage.
<input type="checkbox"/>	Youth – \$150 each Each YOUTH SPONSOR will receive: <ul style="list-style-type: none"> ■ Recognition in printed materials and signage. ■ The reward of knowing a youth attended the conference because of your financial support.
<input type="checkbox"/>	Activity – \$50 each Each ACTIVITY SPONSOR will receive: <ul style="list-style-type: none"> ■ Recognition in printed materials and signage.
Conference Program Support Message Your message of support will appear in the printed conference program and may include company logo and camera-ready digital artwork but no "advertising." Company logo will appear on signage.	
<input type="checkbox"/>	FULL PAGE – \$150 Artwork size 7.5"w x 10"h
<input type="checkbox"/>	HALF PAGE – \$75 Artwork size 7.5"w x 4.75"h
<input type="checkbox"/>	QUARTER PAGE – \$40 Artwork size 3.5"w x 4.75"h
<input type="checkbox"/>	Individual Support of the Michigan Teen Conference – \$25 each Name(s) will appear in the conference program as special supporter(s) of the Michigan Teen Conference! <u>Write here (or attach a list) as you wish the name(s) to appear:</u> <input type="text"/>
Total amount due: \$ <input type="text"/>	

Send check with form to conference fiduciary:

Lutheran Social Services of Michigan
 207 E. Fulton, 4th Floor • Grand Rapids MI 49503

or fax the completed form to **(616) 356-5779**.

Registration Form

2016 Michigan Teen Conference
Take Charge of Your Journey!

Use this form to calculate costs for requesting YIT funds.

**TO REGISTER BY MAIL, complete and send this form to LSSM, 207 E. Fulton, 4th Floor, Grand Rapids MI 49503
TO REGISTER BY FAX, complete and fax this form to fax (616) 356-5779.**

Registrations and full payment must be received by LSSM by May 30, 2016.

Questions? Contact Committee Co-Chair Diana Ripley at LSSM dripl@LSSM.org or (800) 765-0541.

Registration should be completed by the Private Agency or DHHS Staff or Caregiver. Type or print clearly.

Contact person				
Name:		Title:		
DHHS office or private agency:				
Agency address:				
City/state/zip code:				
Telephone:		Fax number:		
Email address for contact person:				
One chaperone is required for every three youth; all must be the same gender.				
Chaperone A signed Chaperone Agreement is required; see separate form.				
Name:				Fee
Role/title:				\$135
Cell phone #:	Email:			
Youth attending A signed Consent form is required for each youth; see separate form.				
Youth's name	Circle # of times this youth has attended the Mi Teen Conf.	Age (at time of this conference)	Circle gender	Circle fee
	Never Once Twice 3+		M F	\$135
	Never Once Twice 3+		M F	\$135
	Never Once Twice 3+		M F	\$135
Other adults/staff attending				
Name		Role/title		Circle fee
				\$135
				\$135
				\$135
On-campus dorm rooms • 4 people per room, same gender • First come, first serve*				
Length of stay	Rate per person	# of people	Amount	
Two nights (Mon. and Tues., June 20 & 21)	\$46		\$	
One night (Tues., June 21)	\$23		\$	

*Alternatively, overnight accommodations can be made at a nearby hotel for **adults/staff other than chaperones**. Nearby hotel options are listed on page 3 of the conference brochure. Hotel costs are not eligible for YIT fund use.

A signed Consent for each youth attending and a signed Chaperone Agreement must be submitted with registration. The forms are provided with this brochure; one person per form; copy as needed.

Registration fee includes all workshop materials; dinner and evening activities on Monday; breakfast, lunch, dinner and evening activities on Tuesday; and breakfast and lunch on Wednesday. Fees must be paid prior to the conference.

County Youth In Transition funds CAN be used to pay for the youth to attend the conference and for chaperones' travel costs only—mileage, meals (\$90 of the \$135 fee is for meals) and overnight room. YIT funds CANNOT be used for chaperones' cost of registration for the conference (\$45 of the \$135 fee). YIT funds can be accessed through the local DHHS foster care worker. If your county has MYOI, consult your MYOI Coordinator for funds.

Total amount payable to

"Lutheran Social Services

of Michigan" by May 30, 2016: \$

LSSM Federal ID#: 38-1360553

After May 30, ADD \$25 to each \$135 registration...

registrants _____ x \$25 = \$

After May 30, NEW TOTAL DUE = \$

Indicate how payment will be made:

- YIT or other FUNDING REQUEST has been made to cover \$135 per YOUTH and \$90 per CHAPERONE and DORM reservations; **amount requested, if any: \$** _____.
- CHECK is being mailed for the \$ _____ **remaining balance.**

Cancellation policy: All cancellations must be submitted in writing. Written cancellations received and verified on or before June 1, 2016, will be refunded, less a \$25 fee. No refunds will be issued after June 1, 2016. If you are unable to attend, please notify LSSM in Grand Rapids—(616) 356-1934 or (800) 886-5776—that you will send someone in your place.

Liability policy: By registering to attend the conference, you are agreeing to be financially responsible for any damages incurred by yourself to any portion of the facilities in use by the conference. You are also agreeing to be responsible for abiding by EMU campus rules and local laws for the duration of the conference.



2016 Michigan Teen Conference
Take Charge of Your Journey!

Conference dates: **Tuesday-Wednesday, June 21-22, 2016**

Location: **Eastern Michigan University**

Chaperone & Onsite Contact Agreement – Signatures Required

As a volunteer chaperone, accompanying as many as three youth to and throughout this conference, I attest to the fact that I have read, understand, and agree to abide by all of the following procedures and protocols:

- ▶ **I will provide supervision for my assigned youth AT ALL TIMES, including:**
 - during general and workshop sessions;
 - during meals and break times;
 - during recreational activities (offered both Tuesday and Wednesday evenings); and
 - in dormitory rooms.
- ▶ As a chaperone, **my primary role** is to provide supervision of my assigned youth and **to help these youth learn and enjoy themselves** at the conference. This is a new experience for many of the teens, and I understand that I am their key resource and leader.
- ▶ **As a role model for the youth**, my positive attitude and enthusiasm will greatly enhance the youths' experiences at the conference. **I will help my assigned youth decide which breakout sessions will best suit their needs; I will participate with my assigned youth in presentations, workshops and activities and encourage the youth to listen to instruction, try new things and be open to new experiences.**
- ▶ I understand that **this signed agreement must accompany the registration form.**
- ▶ I will officially **"check in" at the Chaperone /Onsite Contact Station** upon arrival at the Registration area of the conference.
- ▶ I understand that **cell phones should be turned off** or placed on vibrate during all sessions.

- ▶ I understand that **overnight accommodations** for youth and chaperones will consist of an **on-campus dorm room** and that we will need to **bring any desired alarm clocks, fans, pillows and toiletries**; linens and towels are provided.
- ▶ I understand that **smoking can occur ONLY in designated areas assigned by campus.**
- ▶ I understand that **I must secure all oral medicines, prescription and non-prescription medicines, in their original containers**, or keep them on my person at all times. (Please do not leave unsecured medicines in the dormitory.)
- ▶ I understand that **directions to conference location and parking information will be emailed** to me at the email address provided below.

Chaperone's printed name:
Chaperone's cell phone:
Chaperone's email address:
SIGNATURE of CHAPERONE:
Date signed: ____/____/____
Agency name:
SIGNATURE of AGENCY SUPERVISOR or AGENCY DIRECTOR:
Date signed: ____/____/____

IMPORTANT

Please keep one copy of this signed Agreement for your organization's records and attach one to the Michigan Teen Conference Registration Form.

If you registered online, this form **MUST BE FAXED** to LSSM (attention Kristy Watson) at (616) 356-5779 or Emailed to kwats@LSSM.org no later than May 30, 2016.

Michigan Teen Conference Consent to Use of Name or Photo or Interview

One youth per form;
copy as needed.

Intended use _____ Michigan Teen Conference _____ Date: June 21-22, 2016

REGISTRATION: I give my permission to the Michigan Teen Conference and its Planning Committee to use my name and information about myself and the circumstances of my relationship with the Michigan Teen Conference for registration tracking prior to and during the conference, and accounts receivable billing after the conference, as deemed appropriate by the Conference Planning Committee.

OVERNIGHT ACCOMMODATIONS: I give my permission to the Michigan Teen Conference and its Planning Committee to use my name and information about myself and the circumstances of my relationship with Michigan Teen Conference for room assignment and monitoring at the designated residence hall at Eastern Michigan University.

I understand that I will not be paid for the use of my name, and that I do not have the right to inspect or further approve the use to which my name, likeness, words and/or voice may be applied. I release the Michigan Teen Conference and its Planning Committee and all persons operating under its authority from any liability relating to the use of my name, likeness, words and/or voice or information about the circumstances of my relationship to the conference.

I consent to use of:

Any and all of the following, or

- My name (required)
- My portrait, picture, video image, photograph or any reproduction or likeness of me
- Quotation of my remarks
- Audio recording of my voice
- Information about myself, my family and the circumstances of our relationship with the Michigan Teen Conference and its 2016 Planning Committee.

Youth's Name (please type or print legibly):	Youth's Signature:
Youth's Address:	Daytime Phone:
Agency Name or DHHS County Office:	
Personal Representative for Minor Child:	
Name of Personal Representative (please type or print legibly)	
Signature of Personal Representative:	Date:

For recipients of Department of Health and Human Services-funded services, this permission expires on **12/31/16**.

This consent form is required for all youth who attend the Michigan Teen Conference for items that are identified above with a check mark. Other items of consent are at the sole discretion of the person legally responsible for the youth. Please see box at the right for list of persons responsible to sign this consent.

**Children's Foster Care Manual
FOSTER CARE – RELEASE OF INFORMATION**
Consent for Release of Information to Others
FOM 722-4 (page 3 of 5)

Type of Care/Legal Status	Authorizing Party
Temporary court ward	Court/judge & parent/legal guardian
Permanent court ward	Court/judge
State ward (Act 220)	DHHS monitor*
State ward (Act 296)	DHHS monitor*
Voluntary foster care	Parent/legal guardian
MCI-O	DHHS monitor*
OTI foster care	Sending state authority/court
Child placed out of state	Michigan authority supervising child
*For this conference only	

IMPORTANT

Please keep one copy of this signed Agreement in the youth's file and attach one to the Michigan Teen Conference Registration Form.

If you registered online, this form MUST BE FAXED to LSSM (attention Kristy Watson) at (616) 356-5779 or Emailed to kwats@LSSM.org no later than May 30, 2016.