



New Jersey State Elks

September 15, 2017

Dear Educator/Parent/Guardian:

You are invited to attend the annual New Jersey State Elks' Association state-wide conference for 6th, 7th and 8th grade students on bullying, cyber-bullying, social media issues and other related topics.

The conference will be held Thursday, February 1, 2018. Registration begins at 8:30AM; first program at 10 AM and conference concludes at 2PM. Conference held at the Ocean Place Resort and Spa in Long Branch, New Jersey.

We have engaged great presenters for this event. Albert Mensah, born in Ghana, a national and international speaker will offer his program, "There Is Always A Bigger Bully." Our own New Jersey educator, Craig Jandoli will inform with his special energetic, dynamic and high energy program.

We will have our Drug Awareness/Parenting tips information available as well as representatives from the Cape May County Prosecutor's Office who will offer a workshop to parents, guardians, educators, professionals and volunteers on the legal ramifications associated with bullying and social media concerns.

Included in the \$50.00 per person fee is a welcome snack, complete program and materials, lunch, conference backpack and more. Parents are welcome and encouraged to attend. **We are offering a special registration fee of \$75 for a student and a parent/guardian attending together.** We offer CEU credit for teachers attending and will have letters available for "excused absence" as needed.

To register complete application for each participant and mail as directed to our PO Box 151 in Cape May Court House, NJ 08210. Please include check or PO (with responsible for payment contact and phone.)

We all look forward to seeing you in February. For questions please contact us at the numbers listed above.

Sincerely,

Conference Team

Contact us at njelksconference@gmail.com

Serving Our State By Serving Our Communities

**New Jersey State Elks Association
PATH TO LEADERSHIP CONFERENCE**

February 2, 2018

Ocean Place Resort & Spa, Long Branch, NJ

Registration Fee: \$50.00 per person OR \$75.00 for One (1) Student with Parent/Guardian

STUDENT ADVISOR PARENT/GUARDIAN

NAME: _____ SEX: M / F AGE: ____ DOB: _____
HOME ADDRESS: _____
CITY: _____ STATE: ____ ZIP _____ COUNTY: _____
HOME PHONE: _____ CELL: _____ E-MAIL: _____
SCHOOL: _____
SCHOOL ADDRESS: _____ CITY: _____ STATE: ____ ZIP: _____
ADVISOR'S OR ADULT'S ATTENDING WITH YOU: _____
GRADE: 6 7 8 CIRCLE ONE.

Responsible for payment: ELKS Lodge _____ School _____ Alliance _____ Other _____
Payment (Check or Purchase Order MUST accompany application)
Contact for Payment (Name) _____ Phone: _____
Form of Payment: Check #: _____ Purchase Order #: _____

Registration fee includes: Light Morning Arrival Snack, Lunch, Conference Materials, Workshops.
Transportation to and from the Conference is not included.

Application and Fees **MUST** be returned by December 17, 2017 to:
PATH TO LEADERSHIP, PO BOX 151, CAPE MAY COURT HOUSE, NJ 08210.

I am the parent/guardian of _____, Cell _____, Student/Participant. I hereby give permission for the participant to attend the NJ State Elks Association, Path to Leadership Conference in Long Branch, NJ. The above named individual shall be allowed to participate in all aspects of the conference.

I hereby authorize appropriately trained personnel (EMT), or other medical personnel designated by the Elks, to administer first-aid treatment to the Participant, if necessary. In the event that the Participant suffers a serious injury or illness, I understand that the Elks will notify me as soon as possible to obtain my approval for treatment. If I am unavailable, I designate the following person to give such consent:

EMERGENCY CONTACT NAME: _____
PHONE: _____

In the event that efforts to contact me or my designee are unsuccessful or are not possible during emergency circumstances, I hereby authorize the attending physician to administer any treatment including surgery which he or she deems necessary. I understand that I will, in any event, be contacted as soon as possible. I further give my permission for the Participant to receive aspirin, Tylenol, or other over-the-counter medicine under the supervision of the EMT on-site.