



The Launch Pad Teen Center's Women's Empowerment Breakthrough Conference April 30th-May 2nd, 2021

The Women's Empowerment Breakthrough Conference, a project of The Launch Pad Teen Center, is a three-day leadership retreat for teenage girls, ages 12-18. This year's conference will be in a hybrid format with online workshops and in-person Covid-safe activities.

Non-Discriminatory Policy:

Women's Empowerment Breakthrough does not discriminate on the basis of race, religion, national and/or ethnic origin, marital status, sexual orientation, body type, physical ability, gender expression, or other individual identities in the admin of any of its programs, admissions policies, scholarships, and other conference-related policies and programs, as well as volunteer policies and activities. The conference is open to and welcomes anyone that identifies as a young woman, ages 12-18.

Scholarship Policy:

The Launch Pad Teen Center will fundraise in order to provide scholarships for any participant who needs one. We are able to do this through generous donations of our community and through many rigorous fundraising efforts.

Unlike many organizations, The Launch Pad does not require you to provide proof of financial need in order to qualify for a scholarship. We trust that our participants will accurately reflect their financial situation in their requested scholarship, taking into account that The Launch Pad will have to fundraise the difference. However, The Launch Pad encourages participants to give what they can afford, even if it is a very small contribution. Giving even a small contribution increases participant's ownership and investment in the conference.

Donations:

The actual cost of the WEB Conference is much more than what we charge our participants. With the economic situation in the U.S. we have had more and more girls requesting scholarships. If you are able to give more than the requested tuition for your child to attend WEB this year, we will use the additional money that you send to help provide a scholarship for a teenage girl less fortunate that would like to attend the conference. All contributions above the WEB tuition are greatly appreciated and tax-deductible.

Women's Empowerment Breakthrough Registration Form

REGISTRATION DEADLINE: April 9th, 2021, this will allow us to mail you your box of WEB Supplies, T-Shirt, and Surprises in time for the conference. If you register later than the 9th, it just may mean you will get your box after the conference is over.

Please have your registration form postmarked NO LATER THAN April 9th . If it is not possible for you to mail your registration form by this date please call Suzanne at 928-227-0758.

Please note that registration is FIRST COME FIRST SERVE. We will put you on a waiting list and refund your payment if registration is full when you apply.

WEB Conference Tuition

WEB Hybrid Virtual Conference Weekend Rate: \$50

Please check which option applies:

_____ We have enclosed the full tuition rate (\$50) in the form of cash/check (circle one) Please make checks payable to "The Launch Pad Teen Center"

_____ We have made an additional contribution to WEB of \$_____ and would like a tax-deductible receipt.

_____ We are requesting a partial scholarship*

*Please read The Launch Pad's Scholarship policy on the previous page.

Participant Information

First and Last Name:

Preferred Name or Nickname _____

School: _____

Grade: _____

Age: _____

Participant Phone

Number: _____ Participant

Email: _____

Parent/ Legal Guardian Information

First and Last Name(s):

Phone Number(s):

Email(s): _____

Address: _____

City, State, Zip: _____

In the event of an emergency, WEB staff will FIRST contact the parent(s) or legal guardian(s) listed above. If unavailable, staff will then call the emergency contact.

Emergency Contact

First and Last Name: _____

Phone

Number: _____

Health Insurance

Is the participant covered under a health insurance policy? NO _____ YES _____

If yes, please provide us with the name of insurance company and policy number: Insurance

Company: _____ Policy

Number: _____

Medical Information

1) Do you have any limiting physical conditions (temporary or permanent) or injuries that may impact your experience at WEB? Yes _____ No _____

If yes, please explain the condition(s), activity it could impact, and any limitations or special accommodations needed:

2) Do you have any chronic conditions or illnesses? (Asthma, epilepsy, diabetes)

3) Are you currently taking any medication (prescribed or otherwise, e.g. cold medicine)?

Yes _____ No _____

If yes, please complete the table below for all meds the participant is currently taking. For the safety of everyone at the conference, medications will be collected by the conference nurse at the beginning of the weekend and will be administered exactly as described below.

Medication	Frequency (once a day, as needed, etc)	Time of day administered	Exact Dosage	Condition this treats

4) Do you have any allergies or reactions to medications, foods, or other?
 ___ No ___ Yes. If yes, please identify and explain reaction:

5) Are you allergic to bee stings? Yes ___ No ___ Never been stung ___ If yes, do you carry an epipen? _____

6) Mental Health

Disclosing mental health information can be sensitive and therefore is optional, but if you feel that your weekend could be impacted, we encourage you to disclose. The Launch Pad staff are trained professionals and any information disclosed will remain confidential. Depending on the severity disclosed a staff member might contact you directly in order to ensure we provide proper support and facilitate the best possible care. Staff may also use this information to help connect you to appropriate WEB adult counselors.

Do you have any diagnosable mental health conditions (i.e. anxiety disorders, depression, eating disorders, self-harm, etc.) that may impact your time at WEB?* Yes ___ No ___
 If yes, please explain in detail (attach separate sheet, if needed). Please explain any routine, healthy coping strategy, etc. that the staff could help facilitate in order to make your weekend at WEB a success.

7) Dietary Needs

WEB Staff does its best to accommodate dietary restrictions however we will NOT be able to accommodate vegan diets due to our limited budget. We will contact you and work with you on a one-on-one basis to coordinate food, if need be. If you have any questions please email Suzanne at Suzanne@thelaunchpadteencenter.org

**** IF YOU DO NOT MARK THAT YOU ARE A VEGETARIAN YOU WILL NOT BE PROVIDED WITH A VEGETARIAN MEAL OPTION.****

Are you vegetarian? No _____ Yes _____

Do you have any food allergies or special dietary restrictions? No _____ Yes _____ If yes, please explain diet/allergies in detail:

Participant T-Shirt Size

Youth: X-Small Small Medium Large

Adult: Small Medium Large X-Large 2XL

Girl Power

Please list the name and artist of the song that empowers you the most:

WEB's Cancellation and Refund Policy

Anytime prior to the week before the conference: Participants will receive a partial refund (a \$15 processing fee will be applied) or a full tax credit donation.

Week prior up to 48 hours: 50% refund or a 75% Donation Credit.

Within 48 hours of the start of the conference: No refunds.

In the case of medical or family emergencies, we will review on a case-by-case basis.

The information documented on this form is complete and accurate to the best of my knowledge. Furthermore, I agree to bring any and all medical issues, injuries, illness or concerns to the attention of the staff before participating in any activity, trip, or experience.

Name of Parent or Legal Guardian: _____ Signature: _____

Date: _____

PERMISSION TO ADMINISTER FIRST AID AND EMERGENCY MEDICAL TREATMENT:

As with any activity, I am aware that certain risks of injury may exist. Should an injury occur, I grant permission for program staff to administer basic first aid and/or seek necessary emergency treatment by licensed or certified medical personnel at the nearest medical facility for the above listed participant.

Participant Signature _____

Date _____

Parent/Guardian Signature _____ Date _____

Photo Release Form

Over the course of your WEB experience, photographs documenting your trip will be taken. I hereby permit WEB the right to photograph my likeness and use those images in future presentations and publications including but not limited to admissions, marketing and WEB materials. Photos may be used in print media.

Participant Signature _____

Date _____

Parent/Guardian Signature _____ Date _____

Please mail or drop off this signed and completed registration form and payment to The Launch Pad Teen Center 302 Grove Ave. Prescott, AZ 86301.

- We will notify you when we receive your registration form.
- Please expect a phone call from a Launch Pad staff member in the week before the conference to check in about supplies, needs, questions, etc.
- If you have any questions please call Suzanne at The Launch Pad Teen Center at 928-227-0758 or email suzanne@thelaunchpadteencenter.org

What to wear/bring for in-person activities:

- comfortable clothing that you can be active in
- Closed-toed shoes
- Reusable water bottle
- A positive attitude!

What NOT to bring:

- drugs of any kind, tobacco, alcohol, vapes
- Weapons
- Animals

