

Native American Junior High and High School Academic Challenge/Leadership Camp

Who? Native American Youth in grades (7-12). **How much?** A \$10 fee for camp must accompany registration.

Where? Eastern Washington Bible Camp, Medical Lake **When?** April 16th through the 18th, 2010

What? A powerful 2 ½ day leadership/knowledge retreat. The weekend retreat is open to 10 teams of 8 contact your friends and register together. Submit your applications at the NATIVE Project. Learn about making responsible decisions; Indian culture and spirituality; prevention; cooperation; healing; having fun; developing a positive vision for the future and being a competitive team, in areas of speech/writing & sports Trophies, certificates and cash prizes will be awarded to the winning teams. Everyone will receive a prize. Learn to be a:

“Warrior, Nurturer, Scholar and Community Activist”

How? Have a parent or guardian sign the bottom of this form. Then bring or mail it to The NATIVE Project with your camp registration fee. We must have your permission slip and registration fee:

**NO LATER THAN 4:00PM
ON FRIDAY APRIL 9TH**

FIRST 80 YOUTH PARTICIPANTS TO REGISTER WILL BE ACCEPTED. NO EXCEPTIONS!

- | | | | |
|----------------------|------------------------|-------------------|------------------------------------|
| WHAT TO BRING | *Sleeping Bag & Pillow | *Toiletries | *Something from your home |
| | *Pillow | *Warm clothing | that has personal significance for |
| | *Towel | *Athletic apparel | you to share at Talking Circle |
- *You must get an excused dismissal from school for Friday, April 16th, 2010**

- | | | | |
|---------------------|-------------|----------|------------|
| DO NOT BRING | Cell Phones | iPods | Drugs |
| | Pagers | Walkmans | Alcohol |
| | Laptops | Cars | Cigarettes |

MORE INFO? Contact Tara Dowd or Joe Dressler at the NATIVE Project
Phone: (509) 325.5502 | email: CYSinfo@NATIVEProject.org

*You can also visit us online at: www.nativeproject.org for more information.

* Buses leave NATIVE Project at 9:00am on April 16th. We will return to the NATIVE Project at 1:00pm on April 18th.

NAME <input style="width: 90%;" type="text"/>	AGE <input style="width: 20%;" type="text"/>	(check one) M <input type="checkbox"/> F <input type="checkbox"/>
ADDRESS <input style="width: 95%;" type="text"/>		
CITY <input style="width: 45%;" type="text"/>	STATE <input style="width: 10%;" type="text"/>	ZIP <input style="width: 20%;" type="text"/>
SCHOOL <input style="width: 95%;" type="text"/>		
TRIBE <input style="width: 95%;" type="text"/>		
PARENT/ GUARDIAN (PRINT NAMES):	I, _____ do hereby give my son/daughter _____ permission to attend the Native American Youth Leadership Camp. I understand that the occasional photos will be taken for purposes of promoting the program and I agree to such photos. I authorize camp staff and medical personnel to provide medical treatment for my child as necessary, incl. OTC meds as needed. Following is a list of allergies, meds or medical conditions that the NATIVE Project should know about:	
MEDS/ ALLERGIES:		PHONE NUMBER
PARENT/ GUARDIAN SIGNATURE:		DATE

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Along with your individual application for the camp, you also need to identify the individuals who will be on your team! (Each team must have one(1) male and one(1) female chaperone.)

1 _____	2 _____
3 _____	4 _____
5 _____	6 _____
7 _____	8 _____

Name of chaperone/coach: _____ Phone: _____

Name of chaperone/coach: _____ Phone: _____

Team Name (optional): _____

Each individual and team is required to compete in the sports events, team knowledge bowl, public speaking exercise, debate contest and essay contest. Everyone is a winner during this camp. You and your team will demonstrate why everyone is a winner.

The fee is \$10 for camp, and must accompany registration. For more information on scholarships, or how to pay, email: CYSinfo@NATIVEproject.org

PRIZES:

- 1st place: \$350, trophies, and more.
- 2nd place: \$170, trophies, and more.
- 3rd place: \$80, trophies, and more.

Call or write for your study packet: (EACH TEAM ONLY NEEDS ONE STUDY PACKET)

CONTACT: Tara Dowd or Joe Dressler

The NATIVE Project
1803 West Maxwell Avenue
Spokane, WA 99201
509.325.5502
CYSinfo@NATIVEproject.org

Sponsored by:

The NATIVE Project/NATIVE Health Clinic of Spokane
Spokane Public Schools Indian Education Program (Title VII)
Spokane Community Mobilization Against Substance Abuse (SCMASA)
State of Washington Community Juvenile Accountability Act (CJAA)
Indian Health Services (SDPI)