

# Movimiento Estudiantil Chicano de Aztlán



## REGISTRATION

17<sup>th</sup> Annual National MEChA Conference

### ***Healing our Gente y Tierra by Redefining Labor***

Hosted by Pacific Northwest MEChA Region

University of Washington – Seattle, Washington

May 27<sup>th</sup> – 30<sup>th</sup> 2010

#### MEChA Region\*

\*Chapters without Regional voting rights must attain regional sponsorship in order to attend.

All individuals including community members, high school students, etc. must be sponsored by a chapter to register.

- Alta Califas Norte
- Alta Califas Sur
- Aztlán del Noroeste
- Calpulli Montañas del Norte
- Centro Aztlán
- Centro Califaztlán
- Este Aztlán
- Pacific Northwest
- Southeast Tejaztlán
- Tierra Mid-Atl
- Sponsored by a Region
- Community Member

Chapter name:

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Which MEChA Chapter is sponsoring you? (For chapters and/or individuals without regional recognition.)

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Campus Mailing Address:

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Campus Contact Phone:

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Campus Contact Email:

\_\_\_\_\_

Campus Main Contact Name:

\_\_\_\_\_

Does the campus contact phone number accept text messages?

YES  NO

If no, please provide number which does accept text messages \_\_\_\_\_.

Name of Attendees (Exclude high school and middle school students in this section)

Please print clearly.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_
16. \_\_\_\_\_
17. \_\_\_\_\_
18. \_\_\_\_\_
19. \_\_\_\_\_
20. \_\_\_\_\_
21. \_\_\_\_\_
22. \_\_\_\_\_
23. \_\_\_\_\_

### Food and Dietary Restrictions

Check if applicable and provide the number of attendees accordingly. Details can be provided in the box below.

- |                          |                         |                           |
|--------------------------|-------------------------|---------------------------|
| <input type="checkbox"/> | Vegan                   | How many attendees? _____ |
| <input type="checkbox"/> | Vegetarian              | How many attendees? _____ |
| <input type="checkbox"/> | Gluten Free             | How many attendees? _____ |
| <input type="checkbox"/> | Lactose Intolerant      | How many attendees? _____ |
| <input type="checkbox"/> | Other food Restrictions | How many attendees? _____ |

Please let us know about any other dietary restrictions and/or allergies in further detail.

**Accessibility**

Please indicate if you have monolingual speakers in your group. If so, what language(s)?

- Spanish  Other: \_\_\_\_\_

Are there any additional accommodations your chapter needs?

Please explain: (dis/ability services, language accessibility, space etc...)

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How will you be commuting to the University of Washington?

-This will help us in providing you with useful commuting options.

- Airplane  
 Driving  
 Charter Bus  
 Greyhound  
 Amtrak  
 Other: \_\_\_\_\_

Will you need a parking pass?

Parking passes will only be given to people housed outside of the University District. Passes are limited.

**Only ONE pass per chapter** Additional passes cost \$15.00

- Yes  No

What are your housing accommodations?

- Hotel  
 Motel  
 Live in the local area  
 Staying with a friend/relative  
 I don't know yet  
 Other: \_\_\_\_\_

When do you plan on arriving in Seattle?

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When do you plan on leaving Seattle?

Please keep in mind that Monday is Memorial Day.

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How many high school and/or middle school students do you intend on bringing? \_\_\_\_\_

Name of Attendees (Only high school and middle school students in this section)  
Please print the name of each individual, school, home address, and grade clearly.

Name	School	Address	Grade
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____
8. _____	_____	_____	_____
9. _____	_____	_____	_____
10. _____	_____	_____	_____
11. _____	_____	_____	_____

\*If more than 11 students are registering please attach a separate piece of paper (typed)  
**\*\*Please Note:** A waiver of liability form is required by EVERY high school attendee before admittance into the conference. Please see last page of registration packet for a copy of this waiver. They must be submitted via email, fax or mail with registration.

REGISTRATION PRICES WILL BE AS FOLLOWS:

**COLLEGE/UNIVERSITY**

Priority Deadline: March 20<sup>th</sup> \$35.00  
Regular Registration Deadline: April 24<sup>th</sup> \$40.00  
At the Door \$50.00

**COMMUNITY MEMBERS**

Priority Deadline: March 20<sup>th</sup> \$35.00  
Regular Registration Deadline: April 24<sup>th</sup> \$40.00  
At the Door \$50.00

**HIGH/MIDDLE SCHOOL**

Registration \$5.00 (No deadlines)

**Please Mail, Fax, or Email REGISTRATION FEES**

Address:

MEChA de UW  
**ATTN: Conference Registration**  
3931 Brooklyn Ave NE, Box 355650  
Seattle, Washington 98105

Fax: (206)-616-1041

Email: mechareg@gmail.com

**\*Please Note:** Payments need to be postmarked by March 20<sup>th</sup> to receive priority costs. Any registration payments that are not paid in full will be subject to late fees.

**IMPORTANT:**

All individuals attending the conference must show a form of ID and agree and sign the Principles of Unity. Exceptions will be made for those who cannot provide a form of ID, please contact us at [mechareg@gmail.com](mailto:mechareg@gmail.com)

Types of photo ID accepted: work ID, school ID, gov. ID, tribal ID, international ID, etc. All participants are expected to have read the Principles of Unity prior to attending the conference, as you will be expected to follow them for the duration of the conference.

**CANCELLATION POLICY:**

There will be NO refunds and/or cancellations once registration forms are received (this includes online, mail and in-person registrations). Registration fees will be charged for the number of persons on the registration form. However, if someone is not able to attend the conference a substitute may be designated. Substitutes may be designated in writing via mail or email; they may also be designated at the time of on-site registration or prior. Please note that there will be NO refunds, reimbursements and/or money back for any reason.

**REGULATIONS:**

To ensure that everyone who attends the conference is a registered attendee, regulations will be enforced through ticketing meals and entertainment.

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Hosted by the Pacific Northwest MEChA Region  
University of Washington – Seattle, Washington  
*Healing our Gente y Tierra by Redefining Labor*

University/College & Sponsoring Chapter:

Date:

Location:

Participant's Name:

Age:

Address:

Phone #:

Emergency Contact Info:

**Acknowledgement of Risk and Waiver of Liability**

Please read this carefully. Sign and return this form to MEChA de University of Washington.

Movimiento Estudiantil Chicana/o de Aztlan of University of Washington will not be held responsible for high school students sponsored by any other M.E.Ch.A chapter. High school students will be interacting with university and college students of all ages. The conference co-chairs and volunteers will take care and precaution to prevent accidents, however parents/guardians and or sponsoring chapters must be aware of the above and take full responsibility regarding violations of the Principles of Unity or the University of Washington Student Code of Conduct (478-120 WAC). MEChA de University of Washington is not and cannot be liable for any harm caused to the high school students.

We understand that our participation in any activity hosted by MEChA de University of Washington may incur risks to high school students such as injuries, theft, or damage to personal property. Sponsoring chapters must be aware of the above and take full responsibility. MEChA de University of Washington is not and cannot be liable for your high school student.

I understand that it is against policy for any attendee to possess or consume alcohol and/or drugs for the duration of the conference.

In addition, I grant permission to all of the foregoing to use photographs, motion pictures, recordings, or any other record of this event for any related purpose.

I, \_\_\_\_\_, (name of parent/guardian/sponsor) hereby understands and agrees to the above regarding the high school student \_\_\_\_\_ (student name).

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_