

Complete both forms
(all 3 if requesting scholarship)
One form per person over 12 y.o.

Mail with
payment
to: Beth Beyers, Registrar
1007 Austin St.
Bellingham, WA 98229

Or, if paying by credit card, or sending
a scholarship application, you
can fax to: (775) 667-8671

FULL CONFERENCE REGISTRATION	
DORM	<input type="checkbox"/> \$180 – Early Bird (before Mar 31) <input type="checkbox"/> \$200 – Regular (before April 25) <input type="checkbox"/> \$220 – Late (before May 15) Bunkbeds: 8 beds per room, linens & towels, shared bath facilities \$
SEMI PRIVATE & FAMILY	<input type="checkbox"/> \$230 – Early Bird (before Mar 31) <input type="checkbox"/> \$250 – Regular (before April 25) <input type="checkbox"/> \$270 – Late (before May 15) Two beds, linens & towel, pvt. bath. Families have up to 5 beds. \$
Sharing with (adult's name): _____	
CHILDREN:	No. children _____ Ages 4 - 12 _____ # _____ X \$100 = \$ _____
PRIVATE ROOMS	<input type="checkbox"/> \$280 – Early Bird (before Mar 31) <input type="checkbox"/> \$300 – Regular (before April 25) <input type="checkbox"/> \$320 – Late (before May 15) Same as Semi-pvt, but single occupancy \$
BONUS DAY	<input type="checkbox"/> \$50 – DORM <input type="checkbox"/> \$65 – SEMI-PRIVATE & FAM. <input type="checkbox"/> \$80 – PRIVATE (same choice as above 3 nights) Arrive Thurs afternoon. Community-building dinner and evening. Br & Lunch, Committee meetings or free time Friday. Children to age 12 free. \$
SINGLE NIGHT REG.	<input type="checkbox"/> Thurs dinner, Fri br & lunch <input type="checkbox"/> Sat dinner, Sun br & lunch DORM ONLY Thurs: \$50 Fri, Sat, Sun: \$85 each \$
DAY COMPUTER	<input type="checkbox"/> Fri \$30 <input type="checkbox"/> Sat \$50 <input type="checkbox"/> Sun \$50 <input type="checkbox"/> Mon \$30 Includes all meals \$
T-SHIRT	Conf. t-shirt \$18@: # _____ M _____ L _____ XL _____ XXL _____ \$
DONATE	My Donation for Scholarships:
TOTAL	ORDER TOTAL
AMT of PAYMENT	(if paying for others, staple all registrations together) <input type="checkbox"/> Check <input type="checkbox"/> MO <input type="checkbox"/> MC <input type="checkbox"/> Visa Exp. Date ____/____/____ Card Number: _____ Name on card: _____ \$
Scholarship applicants: See instructions	

REGISTRATION DATA	
Name/Tag Name: _____	Date: _____
Adjective Name: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address: _____	Apt: _____
City: _____	State: _____ Zip: _____
Home Ph: () _____	Work: () _____
Cell (if bringing): () _____	E-Mail: _____
Name & Phone of emergency contact: _____	
Special Diet: <input type="checkbox"/> Diabetic <input type="checkbox"/> Low Sodium <input type="checkbox"/> Vegetarian <input type="checkbox"/> Vegan <input type="checkbox"/> Other: _____	
<input type="checkbox"/> Accessible Room <input type="checkbox"/> Sensory Needs <input type="checkbox"/> Other: _____	
<input type="checkbox"/> Plane <input type="checkbox"/> Train <input type="checkbox"/> Shuttle Bus <input type="checkbox"/> Car Carrier: _____ Arr. Date _____ Time _____	
SCHOLARSHIP REQUEST FORM	
Get Local Chapter sponsorship and their contribution amount. Then, mail us entire registration form ASAP. Reg. amt. is based on mailing date. Don't send \$ until your scholarship is approved.	
Sponsoring Local Chapter: _____	
Chapter Contact Name: _____ Ph: () _____	
<input type="checkbox"/> Ex-Prisoner <input type="checkbox"/> First-Time Attendee <input type="checkbox"/> Other: _____	
AVP Committee member? _____	
AVP Experience: _____	
Reason for Requesting Scholarship: _____	
Total Cost: Registration \$ _____ Transport \$ _____	\$ _____
I can pay: \$ _____ My Chapter can pay: \$ _____	-\$ _____
Remainder: amount of scholarship request	\$ _____
Registrar use only: Date Chapter contribution received: _____	
Date Amount Approved: _____	
Amount Approved: \$ _____	

Checks to:
AVP/USA

REGISTRATION INSTRUCTIONS

BONUS DAY

Thursday aft. to Friday aft. is a bonus (pre-conference) opportunity to come early and sightsee, boat, hike, see the orcas, and just have fun. Need to be productive? The AVP/USA Committees will meet during these times. Come, join us and get in on the action.

FORMS: Please complete one registration form per person over 12 yrs. (Younger are half price). If paying for other registrations in addition to your own, staple them together and indicate whom you are paying for on your form. Payment in full is required at the time of your registration (except scholarship applicants).

Mail or Fax all forms and payment to:

Beth Beyers, Registrar
1007 Austin St.
Bellingham, WA 98229
littleminstrels@juno.com
(360) 752-5776 or Fax: (775) 667-8671

Attach check, money order, or credit card information.

On-line Registration (no scholarships): You can register and pay by credit card on our website:
<http://www.avpusa.org/annual08.htm>.

A CALL FOR FACILITATORS

We've got the site. We've got the theme. What else would anyone want?

Oh, yeah: we need YOU. We need your ideas and sharing to make the conference work. Your insights and experiences are the heart of an AVP National Gathering. Come and be a part of a great conference, and especially, come and help facilitate a workshop or moderate a dialogue.

Click on the REGISTRATION tab.

REFUND POLICY: After a registration is paid for, if the Registrar is notified:

Before April 1: Full Refund
Before May 15: Full minus 15%
After May 15: No refunds

REGISTRATION TRANSFERS: If you cannot attend, you may transfer your registration to another (no charge). The Registrar must be notified prior to May 15.

SCHOLARSHIPS: Money is scarce this year. Please ask for the minimum you need. Apply as soon as possible (in no case after **April 25, 2008**), as scholarships are available on a first-come-first-served basis, and your registration is not final until approved. A scholarship registration covers the amount for dorm rate - early bird registration. Scholarship registrants who register later, or for a Semi-Private or Private room must pay the difference (amount over dorm rate - early bird registration) in effect on registration mailing date.

Former Prisoners qualify for full registration scholarships. Provide any probation or parole restrictions, conditions or limitations.

Although a limited amount of partial assistance on travel may be possible, we're hoping that Local Chapters can help with your travel costs.

Create a 1 to 3 hour (or more) experiential workshop to be offered by your team of facilitators for other facilitators.

- The topic is yours. What challenges you? What worked really well? What ideas/experiences would be stimulating for us to share? It can be part of the theme (The Future of....), or ?? What is of compelling interest to you will make a good workshop and is at

Steps:

First, get endorsement from your Local Chapter, including the amount of support they can give you. Use that information to complete your scholarship application.

Fill out the registration and scholarship forms and mail them in. Do it SOON (see above). Early-Bird registration (cheapest) ends on March 31.

The Scholarship Committee will review your application and we'll notify you of the scholarship amount we're able to provide. Do not send money with your application. You will owe any difference, due by **May 7**.

If your scholarship includes transportation costs, we'll reimburse you at the Gathering.

HELP!!

Scholarships are tight this year. We need your help getting our Ex-Prisoners and First-time Attendees to the Gathering:

If you (or your Chapter) care to make a tax-deductible contribution to AVP/USA for helping others defray their costs for the conference, please indicate the amount and include it with your registration.

the heart of a wonderful Annual Gathering.

- These breakout sessions are workshops. We encourage modeling them exactly as any other AVP workshop: teams, participatory methods, L&L's, etc.

Send your ideas to: **Jan Krouskop**
720 Sudden Valley, Bellingham WA 98229
(360) 527-3545 Fax: (775) 667-8671
Jan@Krouskop.net



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