

## 2009 Nice Conference Registration Form

This form must be completed by EVERY person attending the NICE Conference

This form should be returned to the appropriate State Coordinator by June 15, 2009.  
All registration forms are due to the host state (UT Conferences) by Friday, June 26, 2009.

- Form must be completed by every person attending the 2009 NICE Conference.
- All applicable sections must be completed.
- Signatures must be provided in each applicable section.
- Once completed by the individual planning to attend the conference, this form must be sent to the State Coordinator – this form cannot be accepted by the host state (UT Conferences) until it has first been sent to the State Coordinator.

### I. General Information

Name: \_\_\_\_\_

Sex: \_\_\_\_\_ Male \_\_\_\_\_ Female

Name to be printed on nametag: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Check the category below that best describes your participation in the 2009 NICE Conference:

- \_\_\_\_\_ Youth Delegate . . . “Youth Scholar”
- \_\_\_\_\_ Chaperone . . . “Adult Volunteer”
- \_\_\_\_\_ Returning Delegate . . . “Student Leader”
- \_\_\_\_\_ 2008 Outstanding Youth Scholar
- \_\_\_\_\_ Sponsor/Donor/Speaker/Special Guest . . . “Visitor”
- \_\_\_\_\_ Other (describe) \_\_\_\_\_

Please check your preferred t-shirt size:

\_\_\_\_\_ Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ X-Lg \_\_\_\_\_ XX-Lg \_\_\_\_\_ XXX-Lg

Please check here if you prefer vegetarian meals during the conference:

\_\_\_\_\_ I prefer a vegetarian meal option

Please check here if you are interested in auditioning at NICE for the talent show: \_\_\_ yes

If selected to participate in the talent show, please describe your act: \_\_\_\_\_

**II. All Youth Scholars and Student Leaders MUST complete the following information:**

Date of Birth: \_\_\_\_\_

Most Recent Grade Completed: \_\_\_\_\_ High School \_\_\_ College

**III. Conference Housing – Room Information:**

All room assignments will be made by the host state. All conference accommodations will be provided in University of Tennessee Housing (Morrill Hall) which provides two sleeping rooms connected by a bathroom with two occupants per room (total of four people per suite, one bathroom).

All adult volunteers will be occupying a private room that is part of a two-room suite connected by a bathroom (two adults per bathroom).

Each person staying in University Housing will be provided with bed sheets, one pillow, one pillow case, one towel and one washcloth. Towels and washcloths may be exchanged at the front desk of the residence hall during the week, if necessary. In the event that any linen item or any university property is damaged or not returned, the responsible individuals and their host state will be liable for damages. Everyone attending the 2009 NICE Conference is encouraged to bring their own blanket or sleeping bag.

Each person occupying a room in Morrill Hall will be provided one room key. Any room key not returned by the end of NICE Conference will be charged \$30.00 for key replacement.

By signing below, I acknowledge that I have read the previous information regarding conference housing, room information and room key.

Signature: \_\_\_\_\_

**IV. Adult Volunteers and Student Leaders**

Please indicate which of the following conference activities you would be most interested in providing assistance to:

- \_\_\_\_\_ STUCO (student-lead cooperative)
- \_\_\_\_\_ Case studies
- \_\_\_\_\_ Cooperative simulations
- \_\_\_\_\_ Outstanding Youth Scholar Competition
- \_\_\_\_\_ Talent show
- \_\_\_\_\_ Sunday morning devotional service
- \_\_\_\_\_ Conference newsletter
- \_\_\_\_\_ Staging group
- \_\_\_\_\_ Other

Assignments for adult volunteers and student leaders will be made by the host state, we will do the best we can to satisfy your preferences indicated above. Final assignments will be communicated on-site at the conference.

**V. Dress Code:**

The dress code and behavior of all NICE Conference participants should reflect a high level of integrity, taste and respect. Comfortable and casual attire that is tasteful and appropriate is accepted. Pants and tops should not be revealing in any way. Khaki pants and tops with collars are preferred. Conservative shorts, jeans and attractive T-shirts are acceptable.

Short-shorts, mini-skirts, baggies, ripped and torn clothing, low-cut pants or tops, halter tops, tube tops, strapless tops, bra-less tops, spaghetti straps, vulgar, obscene, suggestive or revealing clothing (no bare midriffs) are not appropriate clothing for adults or students at NICE. Caps will not be permitted inside facilities. Participants wearing clothing deemed inappropriate by conference leaders will be asked to change.

For the Tuesday night banquet, all conference participants (adults and students) are asked to wear more formal, church-type attire (sport coat and ties, long pants, button-up shirts for males; skirts, dressy pant suits, or dresses for females). Participants will be allowed time to change into casual clothes before the dance on Tuesday night.

All conference participants will be provided with an official “the fUTURE is NICE” T-shirt to be worn on Monday for the Dollywood trip.

**VI. Medical Insurance Information and Medical Treatment Authorization**

*Parent/Guardian Authorization:* I hereby give permission to the leaders of the 2009 NICE Conference for routine health care, administration of prescribed and over-the-counter medications and seeking emergency medical treatment including ordering x-rays and routine tests for my son/daughter (name of son/daughter) \_\_\_\_\_. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes. I give permission to the conference leaders to arrange necessary related transportation for me/my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the conference leaders to secure and administer treatment, including hospitalization, for the person registered for 2009 NICE Conference on this registration form.

*To be completed for/by all conference participants:* Is the participant covered by family medical/hospital insurance? \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, I am responsible for any expenses incurred to provide necessary medical attention and treatment for the person named above.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

If yes, please provide insurance information:

Group Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\* A copy of the front and back of the insurance card must be attached \*\***

**VII. Special Needs**

Please use the space below to describe any special needs that you have (room, meals, medical, allergy, etc.).

---

---

---

---

Signature: \_\_\_\_\_

**VII. Authorization to Obtain/Use Images (Photos)**

**Parent/Guardian Approval.**

I hereby grant permission to the leadership of the 2009 NICE Conference to interview, survey, photograph and/or videotape my son/daughter (print name of youth delegate) \_\_\_\_\_ and/or to supervise any others who may do the interview, photograph, survey and/or videotaping and/or permit others to use information from the aforementioned interview and/or the aforementioned images in educational and promotional activities without compensation.

Signature of Parent/Guardian: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

**Adult/Over Age 18 Consent.**

Being eighteen (18) years of age or older, by signing below, and for purposes related to covering, reporting and promoting the conference, I hereby grant permission to the leadership of the 2009 NICE Conference to interview, survey, photograph and/or videotape me (print name) \_\_\_\_\_ and/or to supervise any others who may do the interview, photograph, survey and/or videotaping and/or permit others to use information from the aforementioned interview and/or the aforementioned images in educational and promotional activities without compensation.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

**In Case of Emergency:**

In the event of emergency during the 2009 NICE Conference, the following individuals should be contacted:

	<b><u>Name</u></b>	<b><u>Relationship</u></b>	<b><u>Phone Number</u></b>
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____