



26TH ANNUAL SAN DIEGO PEOPLE FIRST SELF- ADVOCACY CONFERENCE "RIDING THE WAVE OF CHANGE"

**MISSION VALLEY MARRIOTT, 8757 RIO SAN DIEGO DR, SAN DIEGO 92108
FRIDAY, JUNE 3RD – SATURDAY, JUNE 4TH, 2016**

SAN DIEGO'S PEOPLE FIRST CONFERENCE IS A TWO-DAY EVENT FOR SELF-ADVOCATES AGE 18 & OVER, AGENCY STAFF, AND FAMILY MEMBERS. THE CONFERENCE INTRODUCES PARTICIPANTS TO THE POWER AND IMPORTANCE OF THE PEOPLE FIRST MOVEMENT – THE RIGHTS MOVEMENT FOR INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES. THROUGH WORKSHOPS, EXHIBITS, SOCIAL TIME AND NETWORKING, THE CONFERENCE PROVIDES A FORUM FOR SELF-ADVOCATES TO SHARE CONCERNS, GOALS AND SUCCESSES. ON JUNE 3RD – 4TH COME AND BE A PART OF THE SELF-ADVOCATE EMPOWERMENT MOVEMENT IN SOUTHERN CALIFORNIA.

CONFERENCE SCHEDULE

FRIDAY, JUNE 3RD, 2016

11:00 AM – 1:00 PM

- REGISTRATION
- PRE-CONFERENCE ACTIVITIES
 - Entertainment, legislative advocacy and personal rights activities, and more!
 - Food will be available **FOR PURCHASE** during the registration time on the Pavilion Patio

1:00 PM – 2:00 PM

- WELCOME – **SDPF OFFICERS**
- KEYNOTE ADDRESS – **JASON FREEMAN**

2:15 PM – 3:15 PM

- WORKSHOP SESSION #1

3:30 PM – 4:30 PM

- WORKSHOP SESSION #2

4:30 PM – 6:00 PM

- FREE TIME
 - Entertainment and activities

6:00 PM – 10:30 PM

- BANQUET DINNER – Celebrating 50th anniversary of the Lanterman Act!
- DANCE WITH "SKATE THIS PRODUCTIONS"
NED ROUNDTREE AND JEREMIAH WOODS

SATURDAY, JUNE 4TH, 2016

8:00 AM – 10:00 AM

- BREAKFAST
- GENERAL SESSION

10:30 AM – 11:30 AM

- WORKSHOP SESSION #3

11:30 AM – 2:00 PM

- 3RD ANNUAL PEOPLE FIRST STREET FAIR
 - Self-Advocate Artist Vendors
(contact Laura Krebs for sign-up info)
 - Community Resource Exhibitors
 - Entertainment
 - Refreshments
 - Photo Booth

QUESTIONS?

Call Carmel (858) 571-7803 x 118
or Laura (858) 278-5420 x 132.

If you would like an electronic copy of the conference forms and materials email **Lkrebs@ucpsd.org** or visit **<http://ucpsd.org/programs/self-advocacy.html>**

SAN DIEGO PEOPLE FIRST SELF-ADVOCACY CONFERENCE

Friday, June 3rd & Saturday, June 4th, 2016

Cost: All prices are cost per person. The sleeping room entrances are 36" wide and the bathroom entrances are 30" wide. **ACCESSIBLE ROOMS HAVE ONE KING BED AND ACCOMMODATE ONLY 2 PERSONS.** Each person will have his or her own key-card. Unless requested otherwise, all rooms will have 2 queen-size beds.

		<i>San Diego County Resident</i>	<i>Out of County Resident</i>	<i>Includes</i>
Friday, June 3rd - Saturday, June 4th	<i>Own Room</i>	\$ 270.00	\$ 300.00	<i>Souvenir T-shirt Conference Materials Keynote and Workshops Free Time Activities & Entertainment Banquet Dinner Dance Hotel Room (Friday night) Breakfast Street Fair</i>
	<i>Two (2) People in Room</i>	\$200.00	\$ 230.00	
	<i>Three (3) People in Room</i>	\$ 185.00	\$ 215.00	
	<i>Four (4) People in Room</i>	\$ 175.00	\$205.00	
Friday, June 3rd only		\$ 110.00	\$ 130.00	<i>Souvenir T-shirt Conference Materials Keynote and Workshops Free Time Activities & Entertainment Banquet Dinner Dance</i>

(Reduced rate for San Diego/Imperial County residents' available thanks to the financial support received from the San Diego/Imperial Counties Foundation for Developmental Disabilities)



Please note: the Marriott Hotel is NOT providing complimentary parking for the 2016 conference. **Parking at the hotel will cost \$10.00 per vehicle** (overnight or day-only), to be paid when you leave the parking lot. If you are using public transportation there are bus stops (6, 18) and a trolley station (Green Line/Rio Vista Station) down the street.



ATTENDANT CARE IS NOT PROVIDED - All direct support including supervision, medication management and personal care are the responsibility of each conference participant to arrange. If you need attendant care or direct support during the conference, you should schedule your assistance just like you would if you were in your home. Your IHSS worker, paid roommate, family member or group home staff may accompany you at the conference. All attendants **must fill out their own registration form and pay the conference fees** in order to attend the conference.

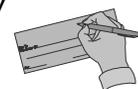
REGISTRATION DEADLINE: MAY 13th, 2016

All registration forms/payments must be received by this date. No refunds will be given after May 13th.

Make Checks Payable to **United Cerebral Palsy**

Mail to: 8525 Gibbs Drive, Suite 209

San Diego, CA 92123



~ CONFERENCE INFORMATION ~



KEYNOTE SPEAKER – JASON FREEMAN

I spent much of my life strongly disliking not being “normal.” At least I accomplished a good deal while feeling badly about myself, although, I wouldn’t recommend this type of motivation. I graduated college with a double major in English and Social Work. I earned a Master of Fine Arts in Poetry. And, for ten years, I worked for an organization that served people with developmental disabilities. This was an extremely rewarding job. On a daily basis, I was seeing the best in other people. Unfortunately, I was still often seeing the worst in myself.

What I discovered from this extensive research project in self-loathing is that constant self-criticism is draining and destructive. About seven years ago, desperate for a change, I went to a yoga class and then another and another and then lots more. I began to fall in love with my body and my voice. This love was definitely not love at first sight. My love for myself blossomed slowly as I engaged in more and more activities that brought me joy. By treating myself with love, I finally realized the freedom we all have—the freedom to love ourselves, imperfections and all. Now I can proudly say: I love my voice. I love my coordination. I love me.

We all want to realize our potential. Unfortunately, we often hold ourselves back out of fear of not getting it right or appearing imperfect. If I had waited for perfection before I attempted public speaking, I would have missed one of the most rewarding parts of my life. When we convince ourselves our dreams are unattainable, we often don’t attempt to realize them. However, when we give ourselves the freedom to do our best and pursue our dreams, imperfections and all, we give ourselves one of the greatest gifts we will ever know. www.jasonwfreeman.com

Riding the Wave of Change

Our 2016 conference will focus on new/upcoming legislative and service changes and on creating, welcoming or understanding change in our personal lives. We will explore topics such as:

- *Employment 1st and Self-Determination*
- *The power of voting & the importance of legislative advocacy*
- *Making change in your IPP*
- *Coping with change*
- *Personal change and growth & making positive lifestyle changes*
- *Setting your own goals in your life*

And speaking of change...

As you have noticed there are some changes to the 2016 conference schedule – **we are starting at 11:00 am on Friday and are ending on Saturday afternoon. There is no program on Sunday.** But don’t worry – many of the favorite conference activities are still happening. And we hope you enjoy some of the new additions as well!

Questions? Email Lkrebs@ucpsd.org or visit <http://ucpsd.org/programs/self-advocacy.html>

Conference Registration Checklist!!!

- One completed registration form PER person. *Support Staff must submit their own registration forms & payment.*
- List names of roommates *(if applicable).*
- Fill out emergency information and sign waiver form
- Return (1) completed **application**, (2) **emergency information & signed waiver** form, and (3) correct **payment** by May 13th, 2016.

INCOMPLETE REGISTRATION PACKETS CAN NOT BE PROCESSED.

Registration Packet – Emergency Contact / Participation Waiver – SIGN & RETURN!!

PLEASE READ AND COMPLETE THIS FORM!

● We need the following information for your personal safety. The information provided below will be folded into the name badge holder of each participant for ready access in the event of an emergency. United Cerebral Palsy and conference volunteers/staff do not provide and are not liable for any direct supervision, medical, or personal care needs. Please review and sign participation waiver on reverse side. Return this entire completed form with registration application and conference fee payment.

● **All SUPERVISION, MEDICAL and PERSONAL CARE** including toileting assistance, medication assistance, and support in navigating and participating in all aspects of the conference are the responsibility of each conference participant. A support person **MUST** accompany all individuals needing any **SPECIAL ASSISTANCE** or **SUPERVISION**.

● PLEASE REMEMBER THAT **ALL SUPPORT PERSONS ARE REQUIRED TO PAY REGISTRATION FEES AND SUBMIT A SEPARATE REGISTRATION FORM** FOR THEIR ATTENDANCE AT THE CONFERENCE.

YOUR NAME (Conference Participant): _____

EMERGENCY CONTACT NAME(s): _____

EMERGENCY CONTACT PHONE NUMBER(s): _____

LIST ANY MEDICATIONS YOU TAKE *(include dosage, amount and purpose- attach separate sheet if necessary)* :

SUPPORT PERSON’S NAME AND PHONE NUMBER (AT CONFERENCE) :	
WHAT KIND OF ASSISTANCE WILL YOUR SUPPORT PERSON PROVIDE DURING THE CONFERENCE?	
DO YOU HAVE SEIZURES? <input type="checkbox"/> No <input type="checkbox"/> Yes	<i>(If yes, please describe the type of seizures, frequency, any intervention which should be done immediately after a seizure, and whether you have ever required hospitalization for a seizure)</i> _____ _____
PLEASE LIST ANY OTHER MEDICAL ISSUES YOU HAVE	

DON'T FORGET TO READ & SIGN PARTICIPATION WAIVER ON THE BACK OF THIS FORM! ➡

Registration Packet – Emergency Contact / Participation Waiver – SIGN & RETURN!!

INDIVIDUAL PARTICIPATION WAIVER

I hereby release, remise, and discharge United Cerebral Palsy and its agents and employees, of and from all claims, demands, actions and injuries, sustained to my person or property as a result of any act while participating in the 2016 San Diego People First Self-Advocacy Conference on the premises of the San Diego Marriott Mission Valley.

I am aware of the risks involved in the Self-Advocacy Conference and that unanticipated and unexpected dangers may arise, and I assume all risks of injury to my person and property that may be sustained as a result and hold United Cerebral Palsy completely and fully harmless from all liability.

I understand that direct support - including but not limited to supervision, personal care, medication assistance, mealtime assistance, physical support in navigating conference grounds, and nursing care - is NOT provided by any agent of UCP or the Self-Advocacy Conference at any point during the conference events. If I require any such direct support, assistance or supervision I understand that I am responsible for arranging for my attendant or care provider to register for and accompany me at the conference.

I represent and certify that I am at least 18 years of age to participate in the Self-Advocacy Conference and that I agree to the above statements.

Signature of Attendee and/or Conservator

Date

26th Annual San Diego People First Self-Advocacy Conference

“Riding the Wave of Change”

Friday, June 3rd – Saturday, June 4th, 2016

CONFERENCE REGISTRATION FORM

PLEASE PRINT INFORMATION CLEARLY. COMPLETE ONE REGISTRATION FORM PER PERSON ATTENDING THE CONFERENCE, INCLUDING ATTENDANTS & CARE PROVIDERS.

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE #: _____ EMAIL: _____

Please check: _____ Consumer _____ Parent _____ Attendant/Staff _____ Other

ADA ACCOMMODATIONS NEEDED: _____

Please check **ONLY ONE**:

_____ Own Room

_____ Two people in room

_____ Three people in room

_____ Four people in room

_____ Friday only (NO ROOM)

<i>San Diego/ Imperial County Resident</i>	<i>Out of County Resident</i>
\$ 270	\$ 300
\$ 200 EACH Person	\$ 230 EACH Person
\$ 185 EACH Person	\$ 215 EACH Person
\$ 175 EACH Person	\$ 205 EACH Person
\$ 110	\$ 130

***Roommate Request:** If you are staying overnight and registering for a shared room, you must list the names of all roommate(s). **We cannot find a roommate for you!** Your roommate(s) must also submit their own registration and payment for the conference. **IF YOU ARE PAYING FOR A SHARED ROOM AND DO NOT INCLUDE THE NAMES OF YOUR ROOMMATES YOUR REGISTRATION WILL NOT BE PROCESSED.**

1. _____

2. _____

3. _____

If you have questions, call Carmel at **(858) 571-7803 x 118** or Laura at **(858) 278-5420 x 132**

REGISTRATION FORMS AND PAYMENT DUE BY May 13th, 2016.

Make checks payable to United Cerebral Palsy (UCP). Mail payment and all completed forms to:
San Diego Self-Advocacy Conference, 8525 Gibbs Drive, Suite 209, San Diego, CA 92123

A confirmation letter with additional information will be sent prior to conference date.

No refunds after May 13, 2016, no exceptions.