

**CONVENTION REGISTRATION FORM – SIDE A**  
**People First of California Statewide Convention – June 6, 7, and 8, 2008**  
**Final Filing Deadline: April 30, 2008 or until filled!**

Everyone who attends the convention must pay the registration fee.  
 This includes self-advocates, speakers, family members and support people.

1. NAME \_\_\_\_\_
2. PEOPLE FIRST GROUP/ORGANIZATION(Optional): \_\_\_\_\_
3. ADDRESS \_\_\_\_\_
4. CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_
5. DAYTIME PHONE:(\_\_\_\_\_) \_\_\_\_\_
6. Are you a:      Self-Advocate    Family Member    Support Person
7. When will you be arriving:    Friday, June 6    or    Saturday, June 7

Please note: People who need assistance should plan to attend the convention with a support person. Neither the conference nor the hotel can be responsible for providing supervision or for administering medications.

8. Do you use a wheelchair for mobility:    Yes    No
9. Other accommodations you may need:    Sign language interpreting services  
Accommodations for convention materials    Vegetarian meals    Other specially prepared food

Please Specify: \_\_\_\_\_

10. Convention Registration: (for Regional Center use only: Vendor # : P63905 Service Code: 005)

**Send this form with payment to:** Supported Life Institute, 2035 Hurley Way, Suite 250, Sacramento, CA 95825

Convention Registration Fees (Does not include hotel sleeping room)	by 4/30/08	after 4/30/08
<b>Hearing + Full Convention - Arrive Friday Noon</b>	\$280.00	\$295.00
<b>Full Convention - Arrive Friday 3:00 p.m.</b>	\$265.00	\$280.00
<b>Partial Convention - Arrive Saturday 9:00 a.m.</b>	\$250.00	\$265.00

**Full Convention includes:** Friday dinner, Saturday breakfast, Saturday lunch, Saturday dinner, & Sunday breakfast.  
**Partial Convention includes:** Saturday lunch, Saturday dinner, and Sunday breakfast.

Please note that convention registration materials will not be accepted from a self-advocate unless Side B is completed.

## MEDICAL/SUPPORT NEEDS FORM – SIDE B

The goal of the Convention Planning Committee is for everyone attending this year's convention to have a positive, educational and safe experience. The information provided below will be folded into each badge holder for ready access in the case of an emergency. The convention registration desk will also maintain a copy of this information for the duration of the event.

**Individuals needing special assistance or supervision must be accompanied by a support person. All supervision, medical and personal care needs are the responsibility of each conference participant.**

1. Name of Registrant : \_\_\_\_\_

Self-Advocate    Family Member    Support Person

2. In case of serious emergency, please list a contact person who is not attending the event and is available by phone during the general times and dates of the convention.

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

Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_ Evening Phone: (\_\_\_\_\_) \_\_\_\_\_

3. Do you have any medical or personal needs which require the assistance of a support person?:

- Yes (If yes, please answer questions 4-8 below.)  
 No (If no, you do not need to complete the remainder of this form.)

4. Name of your support person at the convention: \_\_\_\_\_

Support person's cell phone number: (\_\_\_\_\_) \_\_\_\_\_

5. Roommates at the convention?: \_\_\_\_\_

6. Medications? Include type, dosage, amount, purpose, (attach a separate list if necessary):

7. Do you have seizures?: No 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): \_\_\_\_\_

8. Please list any other medical issues which might require assistance from your support person:

## HOTEL RESERVATION FORM

### People First of California Statewide Convention – June 6, 7 and 8, 2008

If you will be using a **credit card** to make a reservations at the DoubleTree Hotel, **you do not need to fill out this form.** Please call the hotel directly at **(916) 929-8855** and make specific reference to the “People First of California Statewide Convention.” If the room block at the DoubleTree Hotel is filled, please ask the DoubleTree for overflow hotel information.

If you are making a reservation using a **check or money order**, please **complete this form.** Make your check or money order payable to “**DoubleTree Hotel.**” Send this form with the **total payment for all the people in the room** to:

**DoubleTree Hotel, 2001 Point West Way, Sacramento, CA 95815.**

(For Regional Center Use Only – Vendor: DoubleTree Hotel, # P63907 Service Code 005)

1. **NAME:** \_\_\_\_\_

2. **ADDRESS:** \_\_\_\_\_

3. **CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

4. **DAYTIME PHONE:** ( \_\_\_\_\_ ) \_\_\_\_\_

5. Arriving:  **Friday, June 6** or  **Saturday, June 7**

6. Do you request your room be “handicapped accessible:?”  **Yes**  **No**

**There are only a limited number of handicapped accessible rooms available.  
The hotel will meet this request on a “first come, first served” basis.**

7. There will be (circle one): **1 2 3 4** people in my room for:  **Fri & Sat** or  **Sat**

#### HOTEL RESERVATION FEES – Must be received at the DoubleTree by April 30, 2008

Price includes: hotel room & tax. A portion of the hotel fees will be used to subsidize the convention registration fees.

	1 Person/Room (1 bed/room)	2 People/Room (2 beds/room)	3 People/Room (2 beds/room)	4 People/Room (2 beds/room)	Total Cost/Room
<b>Saturday Night Only</b>	\$140.25/person	\$70.13/person	\$50.49/person	\$37.87/person	1-2 people/room \$140.25 3-4 people/room \$151.46
<b>Friday &amp; Saturday</b>	\$280.50/person	\$140.25/person	\$100.97/person	\$75.73/person	1-2 people/room \$280.50 3-4 people/room \$302.92

8. I am enclosing fees for the following reservation:

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

Roommate # 1: \_\_\_\_\_

Roommate # 2: \_\_\_\_\_

Roommate # 3: \_\_\_\_\_

**Total Fees Enclosed:**

\$

# Pre-Convention Event People First Hearing At the Capitol

**\$15  
Event  
Registration**



People First of California will hold our third pre-convention "Hearing" in an Assembly Room of the State Capitol on **Friday, June 6th**. The room will again be reserved for self-advocates to testify to the PFC Board on issues important to us with developmental disabilities.

To figure out space and transportation needs, you must fill out this form and pay the \$15 event fee to participate. Send the form below and \$15 to SLI at the address below. **Register by April 30th** to secure your registration for the Hearing. Helpers/attendants must register too.

Hearing at the Capitol registrants will leave from the Double Tree Hotel to the Capitol at 12:00 p.m. and return around 4:30 p.m. Transportation will be provided. Sandwiches will be available for sale early from 11:00 - 11:45 a.m. But no food is allowed in the Hearing Room. **Your registration and transportation will be confirmed.**

**REGISTER BY APRIL 30TH - MAKE SURE YOUR VOICE IS HEARD!**

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

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

City, ST, Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Pre-Convention Event Order Form**

Fill out form and Send Check or Money order *with your regular convention registration* to:

**Supported Life Institute  
Attn: Pre-Convention Event  
2035 Hurley Way, Suite 250  
Sacramento, CA 95825**

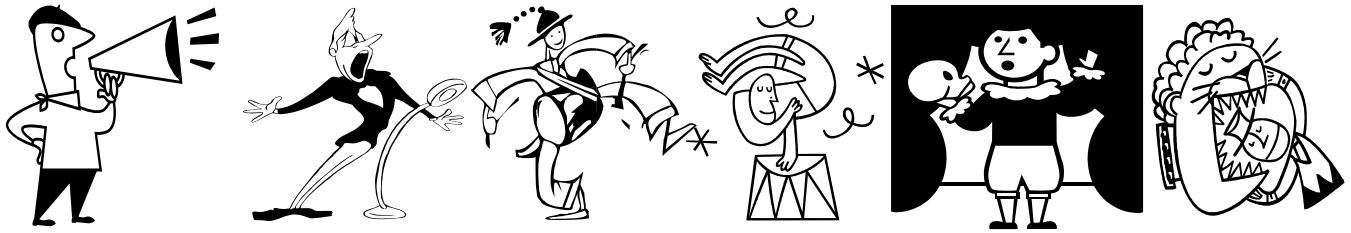
***To register: Please check each box (Check all that apply)!***

I'm coming! I am sending this registration form and paying the additional \$15.	<input type="checkbox"/> <b>Yes</b>
<b><i>I must attend the Convention</i></b> to go to this Pre-event so I've registered for that too!	<input type="checkbox"/> <b>Yes</b>
I must meet at Double Tree-Salon at 12:00 on the 6th to travel to be a part of this Event.	<input type="checkbox"/> <b>OK</b>
I request wheelchair & accessible transportation.	<input type="checkbox"/> <b>Yes</b>

**You must Pre-register to attend this event!**

*Transportation is limited.  
Please Sign Up Early!*

*Let's Go To The Capitol*



**Are you a: Singer?**

**Dancer? Magician?**

**Are You Part of a Talented Group?**

# Sign Up for Our FIRST Ever Convention Talent & Karaoke Show!

**Space Is Limited! Sign Up Early!**

This Form Must be received with Paid Registration.

**Acts Cannot Exceed 5 min.**

All Members Must Be Registered for Convention.

All Applicants will be notified whether they have been one of the lucky few selected.

Talent & Karaoke Show applications postmarked after April 30, 2008 can NOT be accepted.

(Late applications will not receive written notification)

**Karaoke** - Standard Karaoke background music will be available.

Name: \_\_\_\_\_ Day Phone: (\_\_\_\_) \_\_\_\_\_

Song Choice # 1: \_\_\_\_\_

Song Choice # 2: \_\_\_\_\_

**Talent Show** - YOU must provide own accompaniment and props.

Name: \_\_\_\_\_ # People in Act \_\_\_\_\_

Name of Your Act: \_\_\_\_\_

Short Description of the Act: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Length of Act (# min) \_\_\_\_\_

Day Phone : (\_\_\_\_) \_\_\_\_\_ AV Requested: \_\_\_\_\_

**All Performers and Acts will be chosen with consideration given to  
both Variety and the Date the application was received.**

# Register ... Separately

... for the Convention



... and for the Hotel



## Sign up for the convention early!

The convention Sold Out last year.  
Send in your registrations  
as soon as you are able.

Mail your *Convention Registration Form* and *Medical/Support Needs Form* with check or money order by **April 30, 2008** to:

**"Supported Life Institute"**  
2035 Hurley Way, Suite 250  
Sacramento, CA 95825

The Supported Life Institute will send a written **confirmation** of your convention registration.

## Questions?

Call the Supported Life Institute at **916-567-1974**.

## Convention registration Cancellations/Substitutions:

Written cancellations may be made until May 16, 2008 and will be refunded minus a 25% administrative fee.

Requests for refunds (incl. for "no-shows") will not be accepted after May 16th.

With advance notice, substitutions are welcome.

## Make Hotel Reservations as soon as possible... Deadline April 30, 2008

There are not enough **hotel sleeping rooms** for all 1300 attendees to stay at the DoubleTree Hotel. Three nearby hotels will be used for **overflow reservations**. Wheelchair-equipped **van service** will be available between these hotels.

A **limited number** of 'handicapped-accessible' rooms at the convention hotels will be assigned by the hotel on a first-come, first-served basis.

The **Hotel** would prefer for you to send **one check or money order for all people sharing the room**.

Mail *Hotel Reservation Form* with check or money order to:

**"DoubleTree Hotel"**  
2001 Point West Way  
Sacramento, CA 95815

**Questions?** Call the DoubleTree Hotel at **916-929-8855**.

## Hotel Confirmation/cancellations/substitutions:

- ◆ The DoubleTree Hotel or an overflow hotel will send a written confirmation of your reservation.
- ◆ Neither the convention planning committee nor the DoubleTree Hotel will be able to match roommates.
- ◆ **Need to Cancel?** Please Call your convention Hotel at least 7 days before the conference - earlier if possible - so other conference-goers may use those rooms.

## TRANSPORTATION TO THE DOUBLETREE HOTEL IN SACRAMENTO

- ◆ From Airport to Hotel and back, contact **Super Shuttle** for Schedules and Fares: 800-258-3826. (Super Shuttle may need advance notice to have enough wheelchair-equipped vans available.)
- ◆ Contact **ParaTransit** 916-429-2009 about travel from **Greyhound or Amtrak** stations to Hotel & back: (best to call weeks ahead to register and set up a "client record," if you are from out of town)

