



# Complete your Family Advocacy & Self-Advocacy training at the Promise Family Overnight in Lake Geneva!

**When:** Friday, February 23<sup>rd</sup> at 5:00pm through Saturday, February 24<sup>th</sup> at 3:00pm

**Where:** The Timber Ridge Lodge & Water Park, 7020 Grand Geneva Way, Lake Geneva, WI

This event is a unique opportunity for Promise youth and families to get away, connect with each other, and learn valuable information!

***Only youth and families who have not completed Self-Advocacy or Family Advocacy can register. Space is limited to 30 families.***

The event is **FREE**. Hotel stay and meals will be provided. **Registration is required**. Please complete this registration form with your Promise Counselor or Family Advocate. If you need transportation to the event, we will work with you to make arrangements.

Families will also get information on Financial Literacy and Health Promotion.

**Registration deadline is January 22<sup>nd</sup>, 2018. LATE REGISTRATIONS WILL NOT BE ACCEPTED.**

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## Promise Overnight Event Agenda At-A-Glance:

### Friday, February 23<sup>rd</sup>

4:30pm – 5:00pm	Check-In
5:00pm – 5:45pm	Welcome, Dinner, and Introductions
5:45pm – 8:00pm	Youth attend Becoming a Self-Advocate Training Parents attend Family Advocacy Training

### Saturday, February 24<sup>th</sup>

9:00am – 9:30am	Breakfast
9:30am – 12:00pm	Youth attend Becoming a Self-Advocate Training Parents attend Family Advocacy Training
12:00pm - 1:00pm	Lunch and Financial Literacy Orientation
1:00pm – 3:00pm	Youth attend Becoming a Self-Advocate Training Parents attend Family Advocacy Training

# Lake Geneva Promise Overnight Registration Form

Complete the registration form & send to: [shannon@incontrolwisconsin.org](mailto:shannon@incontrolwisconsin.org)

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## Promise Youth Information

First and Last Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Email Address: \_\_\_\_\_ Promise Counselor: \_\_\_\_\_

Will the Promise youth attend the Becoming a Self-Advocate Training? Yes or No

Please list any special accommodations or dietary restrictions (for example sign language interpreter, large print, nut allergy):

## Parent Information

First and Last Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Email Address: \_\_\_\_\_ Promise Counselor: \_\_\_\_\_

Will the parent be attending the Family Advocacy Training? Yes or No

Please list any special accommodations or dietary restrictions (for example sign language interpreter, large print, nut allergy):

## Additional Questions

Please list the full names and ages of other family members who will also be attending:

Will you need childcare during the training? If so, list names and ages of children:

Will you need transportation to/from the event (circle one): Yes or No

Have you talked with your Promise Counselor about attending this event? (circle one): Yes or No

Have you talked to a Promise Family Advocate about attending this event? (circle one): Yes or No

Have you checked your personal and work schedules to make sure you are free to attend? (circle one): Yes or No

This is a unique opportunity for Promise families and space is limited. Are you committed to attending the Promise Family Overnight? (circle one): Yes or No

Thank you!!