

# OAC 2017

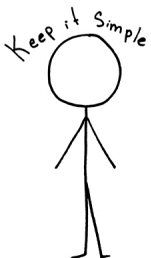
## REGISTRATION CHECK LIST

This check list is provided to prevent chaos for your teen during registration at the conference and ensure their health.

*Please make a copy for yourself and include this check list with your registration!*

- The registration is filled in completely (page 4)
  - The Transportation Section is signed by the Parent/ Guardian (Page 5)
  - Authorization to Obtain Medical Care is filled out and signed by both the Parent/Guardian and Teen (including instructions for any medication that is required for physical or mental health). (Page 6-7)
  - Due to health and safety concerns, teens arriving without required medications, or who are sick with a contagious or physically debilitating condition, will be sent home.
  - I read the Registration Fee information on page 8.
  - I read and signed the OAC Guidelines (Page 9)
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- I am sending along \$1 in quarters for emergency calls (there is no cell service).
- Change of clothes for the trip, sleeping bag, pillow, toiletries, swim suit, towel.
- I am bringing snacks, fruit and vegetables to share.
- I attached my check for:
  - \_\_\_ number of teens
  - \_\_\_ number of scholarships
  - \_\_\_ number of t-shirts
- T-shirt size(s) I ordered \_\_\_\_\_ .



# REGISTRATION FORM

## 6<sup>th</sup> ANNUAL OREGON ALATEEN CONFERENCE August 4<sup>th</sup> – 6<sup>th</sup> 2017

### Welcome

The Oregon Alateen Conference (OAC) is an opportunity for Alateen members to increase their understanding of the Twelve Steps and Twelve Traditions through the sharing of ideas, fun, and fellowship. Alateen Conferences give attendees the increased shared experience of Alateen as a whole. Alateens will have the opportunity to share experiences with Alateens from other places.

Who may attend the conference? Any teen whose life has been affected by someone else's drinking.

Teens can register through their chaperone, their Alateen group or directly with the conference committee by completing this form and sending it to the address provided. This applies to all attendees under the age of 20. Minimum age is 12. An 11 year-old will be considered by the committee on their own merit. Applicants under 11 year olds are too young to attend.

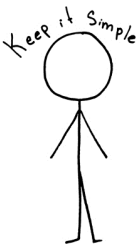
According to the Oregon Area Alateen Safety requirements, only parents, guardians or certified active Alateen sponsors may chaperone or drive an Alateen under the age of 18 to or from the conference. AA and Al-Anon members may attend by invitation only, usually as guest speakers. The numbers of Group Sponsors that may attend are determined by the OAC Committee.

No cell service- Emergency phone service number: Molalla Retreat Center Lodge: 503-829-6349

Website: (Not for emergency use) <http://www.molallaretreat.com/>

Suggested packing list for the Oregon Alateen Conference Weekend:

- Sleeping bag and/or Blankets and pillow, flashlight
- Three days of clothes for warm Days and cool nights plus a towel and swim suit.
- Allergy and other necessary medications.
- Sunscreen, bug repellent, Toiletries, Optional Snacks
- Ear Plugs, Alateen Books, a journal or notebook, pen or pencil
- A dollar in quarters for emergency calls. There is no cell service.



## Event Information

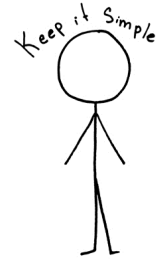
**Name of Event:** Oregon Alateen Conference

**Location:** Molalla Retreat

**Address of Location:** 36208 S. Molalla Forest Rd., Molalla, Oregon 97038

**Phone Number of Location:** 503-829-6349

**Conference Starts: August 4, 2017 5:00 pm Pickup is August 6, 2017 at 12:00 pm**



### PLEASE DO NOT ARRIVE BEFORE 5:00

If someone other than the parent/guardian on this form will be transporting the teen to and from the event, please, fill out the TRANSPORTATION section on page 5. This includes Alateen Sponsors.

### PLEASE BRING YOUR FAVORITE SNACKS FOR ALL TO SHARE:

There are no snacks available for purchase from the Retreat Center. Snack donations are much appreciated.

Some suggestion for snacks

1. Items in individual packages that show ingredients. No items with small wrappers please.
2. Fresh Fruit, vegetables, veggie trays (Please, go easy on the sugar!)
3. Each Alateen Group-Please, bring a case of water.

## Room

Your room assignment is presented in your registration packet at the time of check in. There is a male dorm and a female dorm with an Alateen Sponsor in each. There are gathering rooms available for socializing downstairs. The dorm rooms are for sleeping/resting purposes only. If you have any special needs or concerns around sleeping arrangements, please, contact Lynda S. 503-558-8055.

## Helpful Hints For Filling Out This Form

Use the Check list on the front page.

If the attendee is 18 years of age or older, they can fill out the entire form on their own.

If attendees are under 18 years of age, a parent/guardian signature is required.

## Payment Information

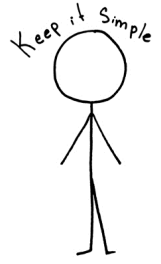
**Early Registration:** \$90.00 Deadline is July 7, 2017. After July 7, are: \$95.00

**JULY 28<sup>ST</sup> IS THE LATEST REGISTRATION WILL BE ACCEPTED AS FOOD MUST BE ORDERED**

Registration is non-refundable but may be transferred to another person with a new registration and approval of registration chair.

MONEY ORDERS are preferred. We are able to accept checks payable to OAC.

# ALATEEN REGISTRATION FORM - OAC 2017



## Alateen Member's Information

First & Last Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Preferred Name on Badge \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

TEEN Contact Number ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Name of Alateen Meeting currently attending/city (if any) \_\_\_\_\_

## Custodial Parent/Guardian Information

First and Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: Home ( ) \_\_\_\_\_

Work: ( ) \_\_\_\_\_

During this event, I can be reached at: \_\_\_\_\_

## ALTERNATE EMERGENCY CONTACT

First and Last Name & Relationship: \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Phone Number: Home ( ) \_\_\_\_\_ Work :( ) \_\_\_\_\_

## Transportation (Parent Or Approved Adult)

First and Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Phone Number ( ) \_\_\_\_\_

### PARENTAL PERMISSION

I, \_\_\_\_\_ (Parent/Guardian Name)

Herby grant permission to \_\_\_\_\_ (Alateen member name)

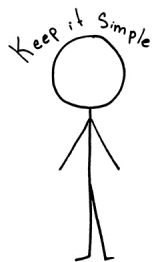
to travel to and from and to participate in the Oregon Alateen Conference under the supervision of

\_\_\_\_\_ (AMIAS/Adult Name) from

\_\_\_\_\_ (dates of event including travel time)

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*To Adults transporting teens: Keep the copy of this form in your possession for the duration of time the Alateen member is in your charge*



## Authorization To Obtain Medical Care

In order for anyone to obtain medical care for another person who is not a family member, this form must be filled out entirely. When distance and time may compromise acquisition of timely medical attention, attendance to a fellowship event can be prohibited if this form is not properly filled out.

## Hold Harmless Statement

As the parent/guardian of aforementioned Alateen member, I am responsible for payment of a medical service required and obtained on said member's behalf. I further hold harmless the event attended by my child and any authorized representative thereof, should any harm come to my child as a result of his/her participation in the activity or procurement of medical treatment.

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_

## Responsible Party(ies): Al-Anon Member In Alateen Service (AMIAS)

Mike Crane . Maria Lavelle . Cathy Crane are authorized upon your signature below to obtain any medical care necessary for the duration of the above stated event:

On behalf of \_\_\_\_\_ (Alateen's name)

Signature of parent or guardian (if under 18)

\_\_\_\_\_ Date: \_\_\_\_\_

Signature of Alateen member (if over 18)

\_\_\_\_\_ Date: \_\_\_\_\_

## Medical Insurance Information

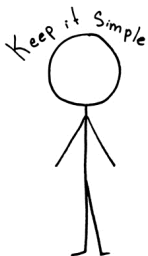
**You must provide medical insurance information in the space below. If teen does not have medical coverage, please, indicate below**

Name of Insurance Co. \_\_\_\_\_

Employer Name \_\_\_\_\_

Group ID Number \_\_\_\_\_ (Or attach a medical coupon if covered by Medicaid)

**MY TEEN HAS NO MEDICAL COVERAGE**



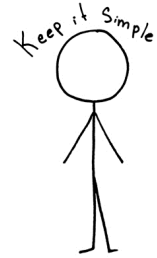
## Diseases/Medical Conditions

\_\_\_\_\_ (ALATEEN) is currently or has had the following health challenges: (please check all that apply)

### Physical Ailments

### Allergies

Heart Trouble		Local Anesthetics	
Tuberculosis		Aspirin	
Stomach ulcer		Sulfa Drugs	
Asthma		Sedatives	
High Blood pressure		Bee Stings / Insect Bites	
Depression		Pollens	
Anxiety		Other (please describe)	
Low Blood Pressure			
Epilepsy			
Liver Trouble (hepatitis)			
Fainting Spells or Seizures			
Diabetes			
Hives			
Penicillin			



Food Allergies: (please describe):

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Other Allergies (please describe):

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## Current Medications

Please list all prescriptions and over-the-counter drugs. These medications MUST be in their original container(s) with labels firmly in place.

\_\_\_\_\_ (ALATEEN) is currently taking medication for one or more of these challenges:

Medication	Dosage per day

## Registration Cost

**Before July 7 - \$90.00 – After July 7 - \$95.00**

**July 28<sup>th</sup> is the latest Registration will be accepted as food must be ordered one week before event.**

Scholarships are half off the registration fee, which equates to \$45.00. To obtain a scholarship, request need to be made in advance and no later than July 7. To obtain a scholarship for 2017 OAC, please, contact or write: Lynda S. 503-558-8055

T-Shirts are available for pre-order, if you would like a 2017 OAC tee, please, select size and include that amount in the money order/check being sent.

T-Shirt: S M L XL XXL     \$15.00

**PARENTS:** Please keep a copy of this entire registration form for your records

## Scholarships

Scholarships are to assist Alateens who are not able to pay their own way to OAC. This weekend is a time for Alateens to get to meet new people and enjoy the program outside their own group. It is a weekend of love, new friendships, and growth. No Alateen should miss this experience.

Scholarships are half off the original price, or \$45 and needs to be requested no later July 7, 2017. The number of scholarships is fully dependent on the donations of members of Al-Anon, AA, and the fundraising that we all do.

### To Obtain A Scholarship:

Please, contact Lynda S. at : [gram8321@comcast.net](mailto:gram8321@comcast.net) or 503-558-8055

### Send OAC Scholarship Funds and Registrations To:

**Lynda S.**

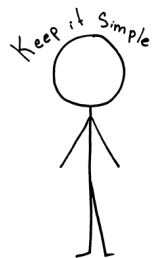
**16100 SE Orchard View Ln.**

**Damascus, Or 97089**

Any questions regarding OAC (Oregon Alateen Conference) please, contact:

**Cathy 503-659-4634**

**Lynda 503-558-8055**





## OAC Guidelines

Here at OAC, we wish to present you with an amazing, fun and loving weekend. Show care for one another and the weekend will be the best. These guidelines are based on the Alateen Twelve Steps and Twelve Traditions and adhere to the Oregon Area Alateen Safety requirements. Everyone at OAC is expected to follow these guidelines; Alateens and adults alike.

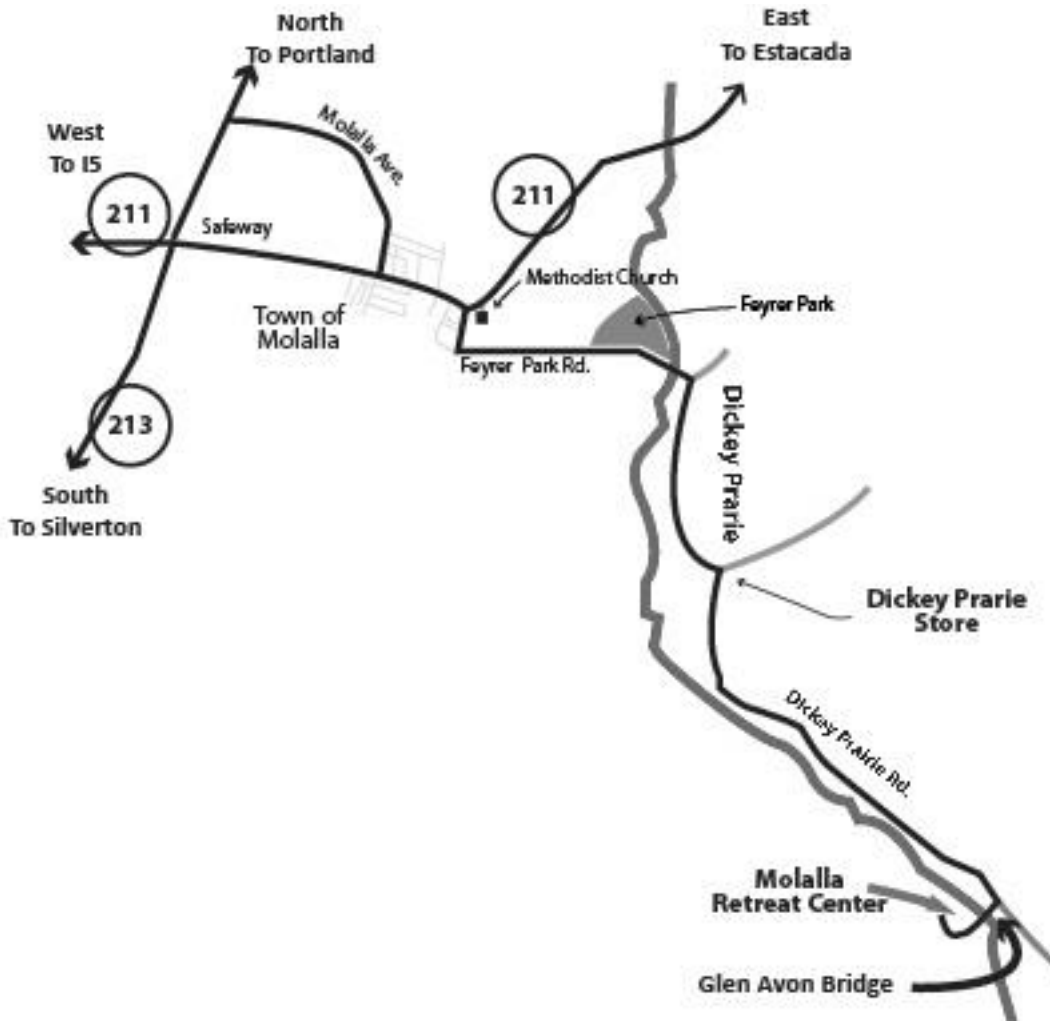
1. Minimum age to attend is 12 years (unless otherwise approved by the OAC Committee)
2. Every Alateen will be assigned an Alateen Sponsor who is responsible for them.
3. One person per bunk/bed. Each member sleeps in their own bunk. No exceptions!! Age 15 & under must be on lower bunks. The bunk / bed areas are for sleeping only.
4. Once registered and checked in, we all stay on the grounds. During the weekend, there is no leaving the boundaries of our site or the conference. Boundaries will be posted.
5. No smoking outside the designated smoking area. We are asked to keep that area free from litter.
6. Participation is required for all meetings, events and functions during the weekend. This includes remaining with the group until all events are over. If sick, let your AMIAS know right away.
7. From 10:00pm until breakfast time all conversations should be confined to the main meeting room and the covered porch area. The foyer and stairs should be kept clear. After 11:00 pm Alateens must use quiet voices as neighbors are just across the river, and we must remain indoors except to move between the main building and sleeping quarters.
8. At designated times you may go hiking if accompanied by an AMIAS and at least 2 committee members know who is going, where, and when you will return.
9. No amplified electronics. Headphones are required. No electronics are to be used during meetings. Put cell phones away during meetings and events.
10. We are guests at The Molalla Retreat Center and we ask that the standards of conduct for The Molalla Retreat Center be respected. Modest dress, polite language, restraint in public displays of affection, self-control when angry, patience, kindness, understanding and respect in relationships.
11. All OAC attendees are responsible for keeping the grounds clean. There is no janitor. We all have to pick up whatever hits the floor. Trash goes in a trash can and if you drop food, pick it up and throw it away. Also, please do not pick any of the flowers. Some are very poisonous and others take years to bloom again once picked.
12. Respect Other's Boundaries. Treat committee members and all attendees with respect. When hugging anyone you don't know well, ask first. Defacing or damaging the Retreat Center grounds, theft, getting into other people's things, purposefully keeping others awake at night, and physically or emotionally forcing yourself on others are all the opposite of what OAC is about and will cause a person to be asked to leave the conference.
13. Possession of alcohol, drugs, weapons and having or viewing items of a pornographic nature are strictly forbidden.
14. If a guideline is broken by a teen or adult, an OAC review meeting will be held immediately. Alateens who are called to an OAC review meeting will be asked to bring an Alateen Sponsor of their choice to the meeting for support. Depending on the results of this meeting, the person responsible for breaking a guideline could be asked to leave the conference immediately and at their own expense.
15. A teen's parent/guardian will be financially responsible for property damage or harm to others.

**I have read and agree to these guidelines:**

Parent/Guardian: \_\_\_\_\_ Participant: \_\_\_\_\_

# DIRECTIONS TO MOLALLA RETREAT CENTER

Our physical address is 36208 S. Molalla Forest Rd., Molalla, Oregon. **DO NOT** use a GPS or MapQuest unless you have these written directions as a back-up.



## Directions TO Molalla, Oregon

**From Interstate 5** . Take the Woodburn exit (#271) and head east on Hwy 211 to Molalla, approximately 18 miles.

**From 205** . Take the Oregon City/Molalla/Highway 213 exit (#10) and go south on Hwy 213 approximately 16 miles to Hwy 211 (There is a Safeway and McDonalds at this intersection). Turn left at the light onto Hwy 211 (Main St).

## Directions FROM Molalla, Oregon to the Molalla Retreat Center

1. Once in Molalla on Hwy 211 (Main Street), travel straight through Molalla (3 mi.) to the Toad & Astro gas station on the left. A large white church (Methodist) will be in front of you. At this junction, turn right towards Feyrer Park/Mathias Rd.
2. Travel about 4/10 mile, veer left staying on Feyrer Park Rd. Don't go straight.
3. Travel 1.7 miles to Feyrer Park Bridge. Cross the bridge and turn right onto Dickey Prairie Rd.
4. Travel 1.7 miles and veer right at the fork in the road, staying on Dickey Prairie. Travel another 3.5 miles, **passing Victory Retreat** on the left (NOT US),
5. After passing Victory Retreat, go 1/10 of a mile and turn right onto the concrete bridge (Glen Avon bridge) crossing the Molalla River. There will be a sign indicating the Molalla River Corridor and S. Molalla Forest Rd.
6. Travel about 400 feet and the driveway for Molalla Retreat is on the right.

Phone number for the camp office is 503-829-9653. The Lodge is 503-829-6349.