



# 2012 PFCA STATEWIDE GATHERING

## Doubletree Hotel, Bakersfield

### June 8, 9 & 10, 2012

## 1<sup>st</sup> Annual Statewide Gathering



Please join us on our journey forward as we break out on our own moving around the state “gathering” members & new members along the way.

You are **People First!!!**



This year will be different! PFCA is concentrating on teaching the People First principles, mission, vision and values with a lot of new surprises! Look forward to these exciting breakout sessions during the gathering:

- ◆ PFCA Mission and Vision
- ◆ Youth in PFCA movement
- ◆ PFCA Resource Books
- ◆ PFCA Five Principles
- ◆ People First History
- ◆ Respect Yourself
- ◆ Becoming a Certified Chapter
- ◆ PFCA Empowerment Statement
- ◆ How to be a PFCA Advocate



## Register now with New Easy Registration Form

One form registers you for gathering events, food, FREE t-shirt, **AND** hotel. All for a much lower price than years past!

### Transportation: No flights, but there are MANY easy & cheap ways to get to Bakersfield!



**Train: Amtrak**  
1-800-USA-RAIL  
1-800-872-7245  
[www.amtrak.com](http://www.amtrak.com)



**Bus: Greyhound**  
1-800-231-2222  
[www.greyhound.com](http://www.greyhound.com)



**Carpool** and maybe rent a car from places like Alamo, Budget, etc



DoubleTree Hotel does have accessible shuttles ...more info to come.



**Questions:** Call Office at (916) 552-6625 or email [carlos@peoplefirstca.org](mailto:carlos@peoplefirstca.org)  
[www.peoplefirstca.org](http://www.peoplefirstca.org)



**People First® Statewide Gathering • June 8, 9 and 10, 2012 • Bakersfield, CA**

**Reg Form/Fees Due: By April 30, 2012 - First Come, First Served**



- 1 Name: \_\_\_\_\_
- 2 People First Chapter or organization: \_\_\_\_\_
- 3 Address: \_\_\_\_\_
- 4 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_
- 5 Daytime phone number ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_
- 6 Email: \_\_\_\_\_@\_\_\_\_\_

7 Are you a/an:  Advocate  Family Member  Support Person

8 **Everyone must pay the fees to attend this gathering.  
This includes Advocates, speakers, family members, and support people.**

The total fees include T-shirt, meals, networking, gathering materials, micro-enterprise info room, exciting & educational sessions, Saturday night Awards Gala Dinner/Dance, and hotel (if staying overnight)

Circle One	No Hotel Room	1 Person 2 Bed/1 Room	2 People 2 Bed/1 Room	3 People 2 Bed/1 Room	4 People 2 Bed/1 Room
Fri/Sat/Sun	\$150	\$330	\$240	\$210	\$195
Sat/Sun		\$240	\$195	\$180	\$172.50
Sat Only		-	-	-	-

9 **\*\*If sending this form in after April 30 Deadline add \$40** + \$

10 **Total Fees (please make check out to PFCA):** = \$

11 Please fill out: If you are staying with roommates you must list their names:  
My Name: \_\_\_\_\_  I will have my own private room.

- Roommate # 1 \_\_\_\_\_
- Roommate # 2 \_\_\_\_\_
- Roommate # 3 \_\_\_\_\_

**You do not have a room until all roommates have paid their fees by reg deadline**

12 You will receive 1 Free T-shirt; please mark 1 Box only to tell us your size:  
 Small  Medium  Large  X-Large  XX  XXX

Please sign & mail full form (front/back) and make check payable to:  
**PFCA, 1225 8th Street, Ste. 360, Sacramento, CA 95814**

People who will need personal assistance should plan to attend the gathering with a support person. PFCA or the hotel cannot be responsible for providing supervision or for giving anyone their medications.

13 Do you use a wheelchair to get around?:

YES

NO

14 Other accommodations (PFCA will do our best to meet accommodations):

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15 Meal requirements:

Vegetarian

Puree

Sugar Free dessert

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

### MEDICAL INFORMATION

In case of serious emergency or unconsciousness please contact the following person.

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

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

**A current list of any and all medications should be with you at all times.**

18 Do you have seizures?:  Yes  No

If yes please describe the type of seizures, frequency, length, any intervention that should be done immanently after a seizure, and whether you have ever required hospitalization for a seizure.

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I understand the above medical information may be shared with the necessary personnel in the event I require medical attention.

19 Signature: \_\_\_\_\_ Date \_\_\_\_\_

If you have further questions you can contact Gathering Staff at (916) 552-6625 or email [carlos@peoplefirstca.org](mailto:carlos@peoplefirstca.org).



## PEOPLE FIRST OF CALIFORNIA INVITES ADVOCATES TO APPLY TO BE A BREAKOUT SESSION SPEAKER

### ***PFCA STATEWIDE GATHERING***

Doubletree Hotel, Bakersfield ♦ June 8, 9 & 10, 2012

If you want to be a conference breakout session speaker, please fill out the attached application and return it to us. **If you are chosen as a session speaker, you will be responsible for your own registration and hotel fees.** Please tell us what you will speak about. All breakout sessions are 45 minutes. They should be fun. It really helps to do something that involves the audience.

This is a list of ideas for the breakout sessions:



- ♦ California Memorial Project
- ♦ Starting your own business
- ♦ Sex Education
- ♦ Living Options
- ♦ Being your own payee
- ♦ Voting and why?

To Apply:

Fill out the attached application



Mail your application by **January 4, 2012** to:

**People First of California  
1225 8<sup>th</sup>, Street, Ste 360  
Sacramento, CA 95814**



Or fax your application by **January 4, 2012** to:

**916-441-3494**



If you have any questions call: **Carlos**

**People First of California  
916-552-6625**



**Applications must be received in our office by January 4, 2012**



**June 8, 9 & 10, 2012 PFCA Statewide Gathering  
Bakersfield, California**



**Breakout Session Speaker Application Form**  
**Please choose from the topics that are on the first page**

1. Name: \_\_\_\_\_

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

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

Title of your session: \_\_\_\_\_

Name of your People First Chapter \_\_\_\_\_

2. How will you make the topic you chose into an interesting and interactive 45 minute presentation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Have you ever been a public speaker at a conference before?  Yes  No,  
If yes, what did you speak about:

\_\_\_\_\_  
\_\_\_\_\_

4. Any other information we should know about your session: \_\_\_\_\_

\_\_\_\_\_