



“Empowering our Native Families”

Arizona Indian Education Association

**2012 American Indian
Parent Conference**

March 12 – 13, 2012

**Glendale Community College
6000 West Olive Avenue
Glendale, Arizona**

A STATEWIDE EDUCATION CONFERENCE FOR ARIZONA’S AMERICAN INDIAN PARENTS

Conference Overview

Conference Goal

To support, inform, and advocate for Arizona's American Indian parents in the education of their children.

Conference Objectives

- To serve as a network for information regarding parent advocacy and involvement.
- To present effective and culturally relevant education services and strategies.
- To identify resources, research, and information related to education, health, community, and culture.
- To showcase successful collaborations between schools and human service programs.
- To present education policy issues and initiatives, including the potential impact on the education of Indian children and their parents.

Workshop Tracks

Health Education
Parental Involvement Culture

Tentative Conference Schedule

Monday, March 12, 2012

Registration	8:00 am – 10:00 am
Continental Breakfast	8:00 am – 10:00 am
Welcome/Keynote Speaker	9:00 am – 10:00 am
Session A Workshops	10:10 am – 11:10 am
Session B Workshops	11:20 am – 12:20 pm
Lunch/Keynote Speaker	12:30 pm – 1:30 pm
Session C Workshops	1:40 pm – 2:40 pm
Session D Workshops	2:50 pm – 3:50 pm
General Presentation	4:00 pm – 5:00pm

Tuesday, March 13, 2012

Registration	8:00 am – 10:00 am
Continental Breakfast	8:00 am – 10:00am
Welcome/Keynote Speaker	9:00 am – 10:00 am
Session A Workshops	10:10 am – 11:10 am
Session B Workshops	11:20 am – 12:20 pm
Lunch/Keynote Speaker	12:30 pm – 1:30 pm
Session C Workshops	1:40 pm – 2:40 pm
Session D Workshops	2:50 pm – 3:50 pm
Closing Remarks	4:00 pm – 5:00 pm

****Please note:** Conference schedule subject to change without notice.



Conference Registration

Conference Dates

March 12 & 13, 2012

Conference Location

Glendale Community College
6000 West Olive Avenue
Glendale, Arizona

Conference Meals: Breakfast and lunch will be provided with paid conference registration for both days. Please reference tentative conference schedule.

Registration:

Early registration fees at \$100.00 per registrant starting from January 23rd to February 29th. Regular registration fees will be \$120.00 per registrant from March 1st to March 13th.

Payment Methods

- Business Checks
- Purchase Orders
- Money Orders

Return Registration Form & Payment to

AIEA
P.O. Box 13402
Phoenix, Arizona 85002
Registration packet available at www.aieacorp.org

e-mail to:
Kathy Savala
kathy.savala@phxschools.org
Phone: 602-257-4051

Cancellation Policy

**No Refunds are allowed
Substitutes are acceptable.**

For registration information contact:

Kathy Savala
Phone: 602-257-4051
Email:
kathy.savala@phxschools.org

For general conference information contact

Julie Nevarez at
Glendale Community College
Phone 623-845-4935
Julie.nevarez@gcmail.maricopa.edu

NO CHILDREN Childcare facilities are not available per College policy, please make other arrangements.

Hotel Reservations & Rates

Towne Place Suites Marriott

9425 North Black Canyon Fwy
Phoenix, Arizona 85021
Phone: 602-943-9510

Special Conference Rate – until March 11- 14, 2012
Studio Suite \$99.00 + plus tax
1 queen Bed plus sofa sleeper, fully equipped kitchen sleeps up to 4 people

- *Contact front desk using phone number listed above.*
- *Registration cutoff date 2/18/12. – 5pm AZ time*
- *Specify AIEA Parent Conference when making reservations*
- *Rate includes Continental Breakfast at hotel.*

Payment: Option 1) Credit Card/ debit Card upon check in
Option 2) Company check for room and tax must arrive a minimum of 7 days before guest check in date.
Option 3) Obtain a Credit Card authorization form by calling hotel desk 602-943-9510.

****NO PURCHASE ORDER****

Spring Hill Suites Marriott

9425 North Black Canyon Fwy
Phoenix, Arizona 85021
Phone: 602-943-9510

Special Conference Rate - until March 11-14, 2012
Double Queen Suite \$109.00 + plus tax
2 queen beds plus sofa sleeper. (Sleeps up to 6)
King Bed Suite \$99.00 + plus tax
1 king bed plus sofa sleeper. (Sleeps up to 4)

- *Contact front desk using phone number listed above.*
- *Registration cutoff date 2/18/12 – 5pm AZ time*
- *Specify AIEA Parent Conference when making reservations*
- *Rate includes Complimentary Hot buffet breakfast*

Payment: Option 1) Credit Card/ debit Card upon check in
Option 2) Company check for room and tax must arrive a minimum of 7 days before guest check in date.
Option 3) Obtain a Credit Card authorization form by calling hotel desk 602-943-0010.

****NO PURCHASE ORDER****



2012 AMERICAN INDIAN PARENT CONFERENCE REGISTRATION FORM

Name: _____

Company Name (if any): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____ Phone: _____

Tribal Affiliation: _____

School District Affiliation: _____

Grade Level(s) of Your Student(s): _____

Early Registration: X \$100.00=\$ (Jan. 23rd to Feb. 29th)

Regular Registrations: X \$120.00 = \$ (March 1st to 12th)

Special Needs Request:

Please complete the following, if applicable. I have a disability and will need special accommodations as follows:

Release, Indemnity & Assumption of Risk

This Release, Indemnity and Assumption of Risk Statement covers all activities, events, sessions, meals, occurrences, participation, observation, and travel between activities, participation and observation associated with the 2012 American Indian Parent Conference. (AIPC)

I agree to assume the risk that unexpected events may occur that may result in harm, injury, illness, damage or loss of my property associated with my participation or observation or other items covered in this release. I agree to indemnify AIEA and not sue AIEA or other organizations and their authorized volunteers involved with AIPC activities for all damages, harm, or injuries associated with my participation, observation or travel if the harm, injury or damages is not due to negligence or fault of AIEA. I understand that AIPC activities are voluntary and I agree to accept the responsibility for my own personal safety.

I consent to the provision of emergency medical treatment for myself to the extent that the treatment is necessary in the medical opinion of the doctor rendering the treatment. If I have any concerns about my ability to participate in any event or activity associated with AIPC activities, I agree to discuss my concerns with my own physician before signing this form.

I also authorize AIEA to film, videotape, photograph or otherwise record my participation in the 2012 American Indian Parent Conference activities and to reproduce and use the film, videotape, recordings and my name, likeness, voice and brief biographical material in connection with non-commercial promotional activities, materials, websites or in media releases related to the AIPC.

In this agreement, "AIEA" includes all entities of the Arizona Indian Education Association.

Signature _____ Date _____

In case of emergency: If I require emergency medical treatment, please contact:

Name: _____ Relationship _____

Home Phone _____ Work Phone _____

Cell Phone _____



2012 American Indian Parent Conference EXHIBITORS FORM

Arizona Indian Education Association welcomes you as a participant in the 2012 American Indian Parent Conference on March 12th & 13th at Glendale Community College located at 6000 W. Olive Avenue in Glendale, Arizona. For your protection as well as all institutions and AIEA Organization involved, we ask that you abide by the following guidelines:

- Exhibitor must register and pay conference registration/AIEA membership fee of \$120.00
- Exhibitor assumes all responsibility for loss or damages to own equipment.
- Exhibitor must supply all hardware/software needed, including extension cords. Or any other special equipment necessary.
- Exhibitor must arrange delivery and transportation of all equipment.
- Exhibitor to use booth as opportunity to pass out information pertaining to business/institution services. Selling or buying of any items **is strictly prohibited** according to GCC policy and procedures.
- Per GCC Policies & Procedures, Exhibitor must meet insurance requirements as stated on attached information sheet.

Check One:

Education Health Parental Involvement Culture

_____ # of tables

Name of Business/Institution: _____

Mailing Address: _____

City _____ State _____ Zip Code _____

Phone: _____ Fax: _____

E-Mail Address: _____

Brief Description of Display/Exhibit: _____

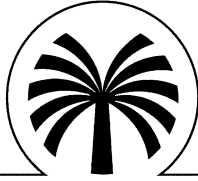
Deadline date: Thursday, March 8, 2012

Please return forms to one of the following:

Mail: AIEA P.O. Box 13402 – Phoenix, Arizona 85002

E-mail to: Kathy.savala@phxschools.org

If you have any questions call: Kathy Savala at (602) 257-4051



GLENDALE COMMUNITY COLLEGE

Student Life Office • 6000 W. Olive Avenue • Glendale, AZ 85302-3090 • 623.845.3529

INSURANCE REQUIREMENTS FOR CONTRACTORS/VENDORS

Contractors, who wish to provide services on Glendale Community College premises, must meet specific insurance requirements before such services are rendered. Glendale Community College is a subdivision of the Maricopa County Community College District.

1. **Indemnification.** *To the fullest extent permitted by law, Contractor shall defend, indemnify, and hold harmless the Maricopa County Community College District (MCCCD) and its agents, officers, officials, employees and volunteers from and against all claims, damages, losses and expenses (including but not limited to attorney fees and court costs) arising from the acts, errors, mistakes, omissions, work or service of the Contractor, its agents, employees or any tier of Contractor's subcontractors in the performance of work or service.*

2. **Insurance.** *Contractor must maintain, during the period of service, insurance policies described below issued by companies licensed in Arizona with a current A.M. Best rating of A: VIII or better. Contractor must furnish the District Risk Manager with certificates of insurance evidencing the coverage, conditions, and limits required as follows:*
 - a. *Commercial General Liability insurance with a limit not less than \$1,000,000 per occurrence for bodily injury, property damage, personal injury, products and completed operations, and blanket contractual coverage, including but not limited to, the liability assumed under the indemnification provisions;*
 - b. *Automobile Liability* insurance with a combined single limit for bodily injury and property damage of not less than \$1,000,000 per occurrence with respect to Contractor's owned, hired, and non-owned vehicles; and*
 - c. *Workers' Compensation* insurance with limits statutorily required by any Federal or state law and Employer's Liability insurance of not less than \$100,000 for each accident, \$100,000 disease for each employee, and \$500,000 disease policy limit.*

** If applicable*

The Certificate Holder must be stated on the insurance certificate as:

**MCCCD Risk Manager
2411 W. 14th Street
Tempe, AZ 85281-6942**

The following must be named as additional insured's for any and all services or projects:

Maricopa County Community College District and its agents, officers, officials, employees and volunteers.

All certificates should be faxed to 623.845.3020, ATTN: Jeff Glemba, in addition to any mailings to the certificate holder.