

Authority, Leadership and Peacemaking: The role of the diasporas

April 16-18, 2010

The Connors Family Retreat and Conference Center, Dover, MA

REGISTRATION FORM

Enrollment is limited to 50. To ensure a place, return your application as soon as possible. If you are applying for a scholarship, your application and a \$100 deposit must be received by **March 15, 2010**.

To register for the conference, please fill out the form below and send it with your payment to:

Authority, Leadership, and Peacemaking Project
96 Browne Street #1, Brookline, MA 02446

DEADLINES

March 15 scholarship applicants	April 2 all others
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Title* _____ Name* _____

Mailing Address _____

City* _____ State/Province* _____ Zip/Postal Code _____ Country _____

Email _____ Phone _____ Fax _____

Organizational Affiliation* _____

*indicates information which will be given to all members of the conference.

Dietary Restrictions: _____

(Kosher/Hallal and vegetarian options will be available)

The information below will be used only by conference staff and administrators for the purpose of forming groups:

Work role _____ Age _____

Gender _____ Race/Ethnicity _____ Religion _____

Other aspects of identity _____

Names of close associates attending the conference: _____

Previous group relations conference experience _____

Previous dialogue experience _____

Conference Fees:	Base Rate (includes tuition and meals):	\$395.00
	Residential option (room with shared bath) add:	\$160.00

Total fees/deposits/payment enclosed: \$ _____

- Payment is due in full with application, unless applying for a scholarship.
- Need-based scholarships available. If applying for a scholarship, please send your application and a letter or email (including the amount of scholarship you are requesting), along with a \$100.00 deposit to reserve a place,
- **by March 15.** Please contact the conference administrator with inquiries at Janine.hackshaw@gmail.com
- Checks or money orders payable the *Authority, Leadership and Peacemaking Project* and send to: 96 Browne Street #1, Brookline, MA 02446

I have read the brochure for this conference in detail and hereby apply for membership. I understand that this brochure constitutes the contract between me and the management of the ALP Conference and that my application authorizes the organization to conduct the conference in the manner described. My conference fee, deposit, or voucher accompanies this application. My signature acknowledges that I understand and agree to all policies stated on this application form.

Signature _____ Date _____

Please check here if you are willing to be contacted about participating in evaluation interviews after the conference (you may withdraw your participation at any time).

For additional information please contact: tracywallach@aol.com

ATTENDANCE POLICY

This kind of learning experience is meant for those who are at a point personally, professionally, academically, and/or politically where they are ready to challenge the way they are in the world and can be present for others doing the same.

Individuals who know in advance that they are unable to attend all sessions are discouraged from applying because the conference events connect and create a temporary institution. Also, because experiential learning events of this kind may be stressful, individuals who are ill or are experiencing a period of personal difficulty may wish to forego attendance at this time.

Confidentiality: In order to support participants' freedom to experiment in whatever way they believe will best facilitate their own learning, staff members will **not** report the behavior of individual members to anyone outside the conference without members' authorization. Members are encouraged to maintain the same degree of confidentiality.

WITHDRAWAL POLICY

An administrative fee of \$100 will be retained if the application is withdrawn on or after April 2, 2010. No refunds will be issued after that date.