

NEW JERSEY STATE ELKS

32nd ANNUAL

PEER LEADERSHIP CONFERENCE

“ELKS AND YOUTH:
FOR A BETTER TOMMORROW”



Celebrating 152 Years of Service

ANTHONY ALFONSO
STATE PRESIDENT

LISA ROVITO
STATE CHAIRMAN

FEBRUARY 7 - FEBRUARY 9, 2020
OCEAN PLACE RESORT AND SPA
LONG BRANCH, NEW JERSEY

Conference Mission Statement

Since 1983, the Benevolent and Protective Order of Elks has been involved in the war on drugs. In his year as National President, Kenneth Cantoli of Hasborough Heights, NJ made Drug Awareness Education a priority. For the past 30 years, the NJ Elks have sponsored a Peer Leadership Conference. Our objectives are to increase participants' ability to make healthy decisions for themselves and others, specifically related to drugs and alcohol, thus Serving Our Communities.

We provide peer leaders with specific tools and resources to implement action plans in their communities, thus creating a network with the ability to educate their groups, schools, and towns on the skills presented at the conference. **The conference gives participants knowledge and information that promotes wellness.**

Conference Registration

- Students must be in 9th to 12th grade only.
- Be certain that all "Responsible for Payment" sections are completed. If using a purchase order, please indicate PO number. All payments should be received prior to the conference
- Make all checks payable to: NJ State Elks Association
- The \$385 registration fee includes: conference registration, materials, food, lodging, and special events.
- Advisors are strongly recommended. Advisors are required for groups of 2 or more.
- No refunds on cancellations received after January 20, 2020. All cancellations received after this date will still require full payment

Mail completed Student/Advisor Applications, Conference Team Registration Form, and payment for \$385.00 pp or Single Advisor Registration \$560.00 pp to:

**NJ State Elks Association
Peer Leadership Conference
P.O. Box 151
Cape May Court House, NJ 08210**

All registrations should be received by December 20, 2019. Registrations received after 12/20 are "space available". Registrations without payment or proof of payment will not be allowed to attend the conference. **Registrations received after January 22, 2020 will not be accepted.**

For more information or additional brochures, please contact William Oakley at 609-972-3454, or njelksconference@gmail.com

Conference Schedule

FRIDAY, FEBRUARY 7

7:30-9:30AM Registration/Breakfast
9:30-10:00AM Welcome
10:00-11:00PM Opening
11:15-12:15PM Keynote 1
12:30-1:30PM Lunch
1:30-2:45PM General Session 1
2:45-3:30PM Advisor Meeting / Room Keys & Assignments
2:45-3:30PM Break
3:30-4:45PM General Session 2
4:45-6:30PM Room Check-In
6:30-7:30PM Dinner
7:30-9:00PM Leo Chase Comedy Hypnosis
9:00-11:30PM Dance
9:00-11:30PM "Chill Time" Activities
12:00PM Room Checks

SATURDAY, FEBRUARY 8

8:30-9:30AM Breakfast
9:45-10:00AM NJ State Elks Welcome
10:00-11:00AM Keynote 2
11:00-12:15PM Student Workshops 1
11:00-12:15PM Advisor Workshop 1
12:15-1:30PM Lunch
1:45-3:00PM Student Workshops 2
1:45-3:00PM Advisor Workshop 2
3:00-3:15PM Break
3:30-4:45PM General Session 3
4:45-5:00PM Group Photo
5:00-5:30PM Turn In Scavenger Hunt Forms
5:30-6:30PM Free Time
6:30-8:00PM Dinner
8:00-9:00PM Room Break
9:00-12:00AM Dance
9:00-12:00AM "Chill Time" Activities
12:30AM Room Checks

SUNDAY, FEBRUARY 9

8:00- 8:30AM Religious Service (Optional)
8:30-9:30AM Breakfast
9:30-10:30AM "That's a Wrap" Session
10:30-11:30AM Keynote 3
11:30-12:00PM Closing

***Agenda Subject to Change**

For More Updates – Once you register:



Join the Facebook group:
"NJ Elks Peer Leadership Conference"



Use the hashtag #elksconference on
Twitter



Follow us @ elksconference and use the
hashtag #elksconference on
Instagram

SCHEDULED CONFERENCE SPEAKERS



Alton Jamison

Walk with Alton through this powerful message of how a young man with a dream was able to overcome life without a father, poverty, and the fact that he was destined to become another statistic. Through desire and determination, he defied the odds and succeeded. Now his desire is to show others they are only one choice away from a different life. Alton's story is a message of hope, determination, and motivation for those who feel they have been handcuffed because of their past, statistics, or their current situation.



Scott Backovich

Scott Backovich is an internationally demanded, youth motivational speaker who presents to tens of thousands each year in the US and Canada. Still currently in his 20's, Scott understands that students today need to be reached in new and innovative ways. From cell phones to Twitter updates, Facebook to YouTube, teens have both grown up in and created a culture that has redefined what it means to connect. Scott understands. He has dedicated his life to connecting with and empowering students everywhere.



Javier Sanchez

Javier Sanchez has a passion for moving youth and adults from inspiration to action using a masterful blend of comedy, poetry, and powerful storytelling. Javier's goal; equipping people with the skills, tools, resources, information, and inspiration to experience life to the fullest in a healthy, positive, and productive way. His diverse background and incredible life experiences enable him to reach the hearts and minds of audiences from all walks of life. As an author, performer, and speaker, Javier has had the opportunity to deliver his life-building messages to youth and adults all over the world.



Julia Garcia

By age 20, JULIA GARCIA, had already set out on her mission to create safe spaces for students to feel seen, heard and be truly connected. After losing people close to her from drugs and violence, GARCIA was determined to be the voice she wished she had growing up. While spending the first 5 years of her speaking career as the co-founder of a motivational speaking arts CRU in Arizona, Truality, GARCIA worked extensively with local k-12 schools, juvenile detention centers and outreach organizations. Recently, GARCIA helped coach inmates for the first TEDx event in a women's prison, where she was also a featured speaker.



Craig Jandoli

Craig Jandoli is Vice Principal of Hawthorne High School. Craig returns to the NJ Elks Peer Leadership Conference this year to talk with students about how to recognize who they are, what their strengths are, and how to use those strengths to help others.



Mike Smith

So there's this kid. He lives in the small town of Imperial, Nebraska. He's got a 2.4 GPA. He's a bit of a troublemaker. To top it off, his name is Mike Smith. In his senior year of high school, Mike realized that being ordinary was a choice. Since then, Mike has never stopped believing that he can do whatever he puts his mind to. Hard work, dedication, and the reckless pursuit of your passions can turn ordinary into something extraordinary. That only you can control your legacy.

Remembering T.J.

Steve and Wendy Sefcik are the parents of 3 boys-- John, T.J. and Matt. On December 1, 2010, Wendy and Steve's 16 year old son T.J. died by suicide. He was extremely sensitive, yet also outgoing, funny, an honor student and varsity athlete. He was the life of the party, but with inner pain that he kept well hidden. He suffered from depression and lost his battle with the disease on December 1, 2010. Through the overwhelming pain of losing their precious son, Steve and Wendy work each day to count their blessings and to give thanks for all they have been given instead of all they have lost



Wendy & Steve Sefcik



T.J. Sefcik

2020 NJ STATE ELKS PEER LEADERSHIP REGISTRATION FORM
FEBRUARY 7-9, 2020
REGISTRATION FEE: \$385 PER PERSON
***NO REFUNDS AFTER JANUARY 20, 2020**

Please print clearly and completely ALL information requested.

Check one below:

STUDENT ADVISOR ADVISOR SWEATSHIRT SIZE _____

Name: _____ Sex: M / F Age: _____ DOB: _____

Home Address _____

City: _____ State: _____ Zip: _____

School: _____ Organization You Are Representing: _____

Day Time Phone: _____ Cell Phone: _____ Email: _____

Arrival Date: _____ Departure Date: _____

Advisor(s) or Adult(s) attending with you: _____

Ethnicity (Circle One): African American Asian Caucasian Latino Native American Other _____

Grade: 9 10 11 12 Advisor contact number: _____

Roommate Request (Not Guaranteed): _____

Advisor Single Room (\$560.00): Yes / No

Have you previously attended the NJ State Elks Conference? Yes / No

Responsible for Payment (Must be completed): Elks Lodge _____ School _____

Alliance _____ Other _____

Contact Person for Payment: _____ Phone Number: _____

Form of Payment: Purchase Order #: _____ OR Check #: _____

Form of payment must accompany this application

HEALTH HISTORY

Name of Physician or Clinic: _____ Phone: _____

Physician Address: _____

City: _____ State: _____ Zip: _____

Date last Tetanus or Booster shot: _____ Do you wear contact lenses?: Y / N

Food or medication allergies (including reaction): _____

Dietary Restrictions: _____

Diabetic?: _____

If so, do you take insulin? Type: _____ Dosage: _____ x per day: _____

Hypoglycemic?: _____

If so, do you take oral glycemics? Type: _____ Dosage: _____ x per day: _____

Are you currently under medical care?: _____

If yes, please explain: _____

Will you be on any medications during the conference?: _____

If so, Name: _____ Dosage: _____ Reason: _____

Please list and explain all medical conditions, including asthma, dizziness, migraines, seizures, etc.: _____

**HEALTH FORM
MUST BE COMPLETED FOR ALL STUDENTS
PLEASE PRINT CLEARLY**

I am the parent/guardian of: _____ (Student Participant)

Consent for Attendance

I hereby give permission for the Participant to attend the NJ State Elks Association Peer Leadership Conference in Long Branch, NJ on February 7 to February 9, 2020. The above named individual shall be allowed to participate in all above mentioned informational and physical activities and workshops.

Medical Consent

I hereby authorize appropriately trained personnel (EMT), or other trained personnel designated by the Elks, to administer first-aid treatment to the Participant, if necessary. In the event that the Participant suffers a serious injury or illness, I understand that the Elks will notify me as soon as possible to obtain my approval for treatment. If I am unavailable, I designate the following people to give such consent.

EMERGENCY CONTACT #1

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Day Phone: _____ Cell Phone: _____

EMERGENCY CONTACT #2

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Day Phone: _____ Cell Phone: _____

In the event that efforts to contact me or my designees are unsuccessful or are not possible during emergency circumstances, I hereby authorize the attending physician to administer any treatment including surgery which he or she deems necessary. I understand that I will, in any event, be contacted as soon as possible. I further give my permission for the Participant to receive aspirin, Tylenol, or other over-the-counter medicine under the supervision of the EMT on-site.

Payment for Medical Treatment

I agree to be responsible for paying any medical bills, either directly or through insurance payments, which may result from any treatment deemed necessary by medical personnel.

**THIS MEDICAL INSURANCE INFORMATION MUST BE COMPLETED
OR THIS FORM WILL BE RETURNED.**

Policy Name: _____ Policy Holder: _____
Identification or Group Numbers: _____
Insurance Company Address (below): _____

If you do not have medical insurance, please indicate that by checking this box:

Consent for Photographs

I hereby give permission for photographs to be taken of the Participant, and for photographs in which participant is included to be used for purposes of publicity of the Elks Conference.

Release of Liability

For an in consideration of the participation of the Participant in Elks program(s), I hereby release and hold harmless NJ State Elks Association, their officers, employees, volunteers or agents, and any medical personnel they select, from any and all liability or damages including accidental injury or illness which may occur during the Participant's attendance at the Elks Conference.

Name of Parent/Guardian: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
Business Phone: _____ Place of Business: _____

Signature of Parent/Guardian (Name and Relationship to Participant):

(signature above) Relationship: _____ Date: _____

New Jersey Elk's Peer Leadership
P.O. Box 151
Cape May Court House, NJ 08210

