

# 9<sup>th</sup> Annual High School Outreach Conference

University of California, San Francisco

Saturday April 14, 2012

Dear Parent/Guardian:

Your child is invited to attend the 9<sup>th</sup> Annual High School Outreach Conference at UCSF. The purpose of High School Outreach Conference is to expose and excite high school students from diverse, under-represented backgrounds and/or under-served communities in the SF/Bay area about health sciences. The High School Outreach Conference will be a full day of activities including workshops and demonstrations in dentistry, medicine, pharmacy, nursing, physical therapy, graduate and post-doctoral studies, and motivational speakers. Breakfast and lunch will be provided, and **this event is completely free**. This is an excellent occasion for your child to be exposed to the opportunities available after college.

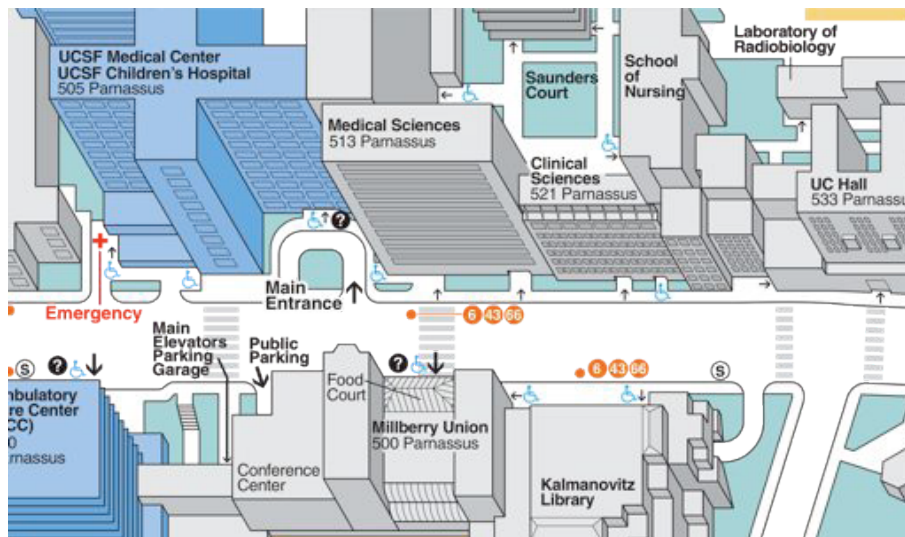
Demographic information of high school students attending this event will be collected along with registration and permission forms. This information will assist the High School Outreach Planning Committee and/or UCSF Student Organizations in determining the diverse representation of high school students. This demographic page will be separated from the registration and permission form upon receipt.

Please complete the attached registration and permission form and return it by **Monday April 2, 2012** to guarantee a spot for your child. You may also fill out the **application online at <http://www.adeaucsf.org/hsoc2012.html>**. On Saturday, April 14, 2012 your child will meet in the lobby of the Medical Sciences building for check-in. Your child will be given a free t-shirt, and a folder with details of the day's events, as well information on applying to the various schools on campus. He or she will then be welcomed to a complimentary breakfast before our opening ceremony in Cole Hall. Additional logistical information is provided below. Please keep this document for your records.

Regards,  
Kristina Ahlwardt  
High School Outreach Conference Chair

Your child is invited to attend the 9th Annual High School Outreach Conference at UCSF.

Date and Time	Saturday April 14, 2012 8:30am-4pm
Location	University of California, San Francisco, Medical Sciences Building 513 Parnassus Ave, San Francisco, CA 94143
Cost	Attendance, including continental breakfast & lunch, is <b>FREE</b> for qualified students.
Transportation	The student is responsible for his/her own transportation. Transportation will not be provided.



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## Registration and Permission Form

(Mail in this page only, previous page is for your reference)

Please print legibly in blue or black ink. This form must be completed and submitted in its entirety

**High School:** \_\_\_\_\_

Student's Name	Age	Sex (M/F)	Grade Level	Graduation Year
_____	(____)	_____	_____	_____
Street Address	Home Phone			
_____	_____			
City, State, Zip Code	Email address			
_____	_____			
Parent/Guardian's name	Emergency Contact Number			
_____	_____			

I give permission for my child to attend the 9th Annual High School Outreach Conference at UCSF. I release UCSF and individuals from liability in case of an accident during activities related to the High School Outreach Conference, as long as normal safety procedures have been taken.

In case of an emergency, I give permission for my child to receive medical treatment. I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.

Photographs, videotape, and/or digital recordings will be taken at the 9th Annual High School Outreach Conference at UCSF. I give permission for my child (and/or me if I am a chaperone) to be photographed, videotaped, or digitally recorded at this conference. I agree that these images may be used by High School Outreach Conference Committee, UCSF Student Organizations and UCSF for a variety of purposes such as promoting high school outreach and recruitment for future conferences and that these images may be used without further notifying me. I understand that my child's name and/or my name will not be used in conjunction with any print, video or digital images. I understand that there will be no financial compensation for images recording my child and/or me.

\_\_\_\_\_  
Parent's/Guardian's Signature

\_\_\_\_\_  
Date

Please make a copy of this form for your own records and mail the original form to the address listed below. Forms must be postmarked by **Monday April 2, 2012**.

**High School Outreach Conference 2011**

**Attn: Kristina Ahlwardt**

1381 7<sup>th</sup> Avenue, San Francisco, CA 94122

Code: "apps"