



2016 HHSAA STUDENT LEADERSHIP CONFERENCE

Incredible attention is being paid to high school athletics and activities. Student-athletes are looked upon as leaders in their school and community. They play a key role in shaping a positive and successful climate and culture within their schools and other students. The National Federation of State High School Associations (NFHS), which serves more than 11 million students nationwide each year, strives to train talented, committed young people to become better citizens, who will be positive contributing adults. For these reasons, the Hawaii High School Athletic Association (HHSAA) is pleased to announce that it is partnering with the NFHS to host its very first Student Leadership Conference. The conference theme will be, "Setting Yourself Up For Success".

The HHSAA is excited about this inaugural conference, and it will focus on relevant and contemporary issues affecting today's students in education-based athletics. Students will sharpen their leadership skills and realize the privilege and power of their influence in their school, community, and life.

Each student will learn how to develop and maintain healthy relationships with teammates, coaches, adults, leaders, and officials. They will learn conflict-resolution techniques and understand how to be better communicators with their peers and adults. The format will be mostly small group breakout sessions.

Conference expenses including travel, ground transportation, registration, gifts, materials, meals, and fees will be subsidized through the NFHS, HHSAA, and corporate sponsors. Each student will only be responsible for \$300.00 (with airfare) or \$150.00 (without airfare).

WAIKOLOA, HAWAII

The South Kohala coast of the island of Hawaii is home to Waikoloa Beach. Ancient Hawaiian history and culture, including petroglyphs believed to represent the heavens, stand side-by-side with ultra modern full-service resorts. It is the perfect backdrop to serve as host for the first HHSAA student leadership conference.



STUDENT APPLICATION

Student's First and Last Name _____

Student's Home Address _____

City _____ State _____ Zip _____

Home Telephone Number _____ Student Cell Phone Number _____

Student Email Address _____

Current Grade in School _____

Parent or Guardian Name _____

Parent Email (if no email, provide address) _____

(If different from student) _____

T-shirt Size (based on men's sizing) _____

School Name _____

School/Association Twitter Handle _____

School Address _____

City _____ State _____ Zip _____

School Telephone Number _____

Principal's Name _____

Principal's Email Address _____

List all school and community activities you are involved in with an emphasis on leadership roles.

In 200 words or less, please answer the following question:

a. Why is learning to be a better leader important to you?

b. How will you apply the skills and techniques learned to your team or group?

If I am selected as one of my school's delegates, I agree to attend the 2016 HHSAA State Student Leadership Conference, June 6-7, 2016, in Waikoloa, Hawaii.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

To be submitted with the Student Health History/Consent for Treatment Form, the Code of Conduct, the Liability and Release Waiver.

Return no later than March 31, 2016, to your local state association office:

University Laboratory School

Attn: Ms. Hoku Haliniak

1776 University Ave.

Honolulu, HI 96822



STUDENT HEALTH HISTORY/CONSENT FOR TREATMENT

(Please Print)

Student's First and Last Name _____

Student's Home Address _____

City _____ State _____ Zip _____

Home Phone Number _____ Male ___ Female ___ Date of Birth _____ Age _____

Parent or Guardian Name _____

Mother Phone Numbers – Home _____ Work _____ Cell _____

Father Phone Numbers – Home _____ Work _____ Cell _____

Emergency Phone Number (Other than parent/guardian) Name _____

Relation to Student _____

Family Physician _____ Physician Phone Number _____

Insurance Company _____ Group Plan Number _____

Policy Number _____ Insurance Benefit Code _____

Does the student have any special physical needs? Yes No

If yes, please explain

Does the student have any special dietary needs? Yes No

If yes, please explain _____

Is student allergic to any drugs? (e.g. penicillin, insulin) _____

Is student allergic to bee stings? _____ Can student take antihistamines? _____

Is student currently under any medical treatment? (please explain) _____

Medication student is currently taking (includes antihistamines, anticonvulsants, tranquilizers, insulin, etc.) _____

Any special health problems? (Past and Present) _____

List operations within the past year _____

Emotional problems (e.g. hyperventilation, hysteria, depression, etc.) _____

(This document will be retained in confidence by the Leadership Conference Medical Director)

To be submitted with the Student Application (2 pages), the Code of Conduct, the Liability and Release Waiver.

"I hereby give permission for the above named student to be treated by a physician or licensed nurse at a hospital or on the scene in the event of a medical or surgical emergency."

Parent/Guardian Signature _____ Date _____



RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

(The "Agreement") FOR THE HHSAA State Student Leadership Conference (The "Event")
In consideration for being permitted to observe, work for, or for any purpose participate in any way in the Event, EACH OF THE UNDERSIGNED, for him or herself, his personal representatives, heirs, next of kin, acknowledges, agrees, and represents that he has, or will immediately upon entering the Event:

1. **RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE:** The Hawaii High School Athletic Association (HHSAA), any and all sponsors of the Event, their subsidiaries, parents, affiliates, officers, directors, agents and representatives, the Event promoters, participants, venue operators and owners, city officials, competitors, technicians, any persons in any restricted area, lessees of premises used to conduct the Event and each of them, all for the purpose herein referred to as "releasees", from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any and all loss or damage, and any claim or demands therefore on account of injury to the persons or property resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is in or upon any restricted areas, and/or, competing, officiating in, observing, working for, or for any purpose participating in the Event.
2. **AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS** the releasees and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in or upon the restricted areas or in any way competing, officiating, observing, or working for, or for any purpose participating in the Event and whether caused by the negligence of the releasees or otherwise.
3. **ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE** due to the negligence of releasees or otherwise while in or upon restricted areas and/or while participating, observing, working for, or for any purpose participating in the Event. EACH OF THE UNDERSIGNED EXPRESSLY ACKNOWLEDGES AND AGREES THAT THE ACTIVITIES OF THE Event are dangerous and involve the risk of serious injury and/or property damage. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement portion thereof is intended to be as broad and inclusive as is permitted and that if any portion thereof is held invalid, it is

agreed that the balance shall, notwithstanding, continue in full legal force and effect.

4. THE UNDERSIGNED hereby grants permission to the HHSAA full permission now and forever, with no obligation to compensate me further, to use photographs, videotapes, motion pictures, recordings, or other record of my participation for advertising and promotional materials and for any other purpose the HHSAA, in its sole discretion deems necessary. This includes the posting of such photographs, recordings, or other media representation of myself, on any website, or licensing others to do so in their promotional materials or websites.

NOTICE: BY SIGNING THIS RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, RELEASE OR IS AGREEING TO HAVE ANY CLAIM DECIDED BY NEUTRAL ARBITRATION AND IS GIVING UP THE RIGHT TO A JURY OR COURT TRIAL. THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representation, statements or inducements apart from the foregoing written agreement have been made.

Print Student Name _____ Date _____

Student Signature _____ Date _____

Legal Parent/Guardian Signature _____ Date _____



CODE OF CONDUCT

Student Name _____ School _____

I, the undersigned student leader, do hereby agree:

1. To abide by all the rules and regulations set forth by the Hawaii High School Athletic Association, the Adult Ambassadors, and all adult supervisors.
2. To waive and release any and all rights and claims for any damages I may have against the Hawaii High School Athletic Association, and any other employee of the HHSAA, for any injuries arising from my participation in this activity.
3. To accept responsibility for my behavior so that it does not reflect discredit on my school, my state association, or myself.
4. To use no tobacco, alcohol or illegal drugs at the Conference.
5. To treat all student and adult ambassadors, college and adult staff, HHSAA staff, speakers, and hotel staff with respect and dignity.

I understand that if I break any of the rules of the Conference that I will be sent home immediately at my own expense, after the HHSAA has made arrangements with my parent/legal guardian.

Signature _____ Date _____

Print Name _____

I, the parent/guardian of the above signed student, understand the obligations accepted by my son/daughter as outlined above and give my consent for his/her participation in the 2016 HHSAA Student Leadership Conference. I do further release the HHSAA, sponsors of this conference, and any other employee of said organizations from any claim for damages incurred by the said student that might be a direct or indirect outgrowth of his/her participation in this conference.

Signature _____ Date _____

Print Name _____

TENTATIVE DELEGATE SCHEDULE:

Monday, June 6, 2016

- 6:00 - 9:00 a.m. Student Arrive in Kona
- 9:00 - 10:00 a.m. Transportation to hotel
- 10:30 - 12:00 p.m. Registration
- 12:15 - 1:15 p.m. Open Ceremony
- 1:30 - 2:30 p.m. Session 1 - Student Session
- 2:45 - 3:45 p.m. Session 2 - Student Session
- 4:00 - 5:00 p.m. Session 3 - Student Session
- 4:00 - 5:00 p.m. Session 3 - Adult Session
- 5:15 - 5:45 p.m. Proposal Discussion
- 6:00 - 7:00 p.m. DINNER
- 7:15 - 8:15 p.m. Breakout Groups "What is HHSAA SAC?"
 - Group I - KIF
 - Group II - OIA
 - Group III - BIIF
 - Group IV - MIL
 - Group V - ILH
- 8:30 - 9:00 p.m. Group Discussion
- 9:00 - 11:00 p.m. Leadership Lounge

Tuesday, June 7, 2016

- 7:00 - 8:00 a.m. BREAKFAST
- 9:00 - 11:30 p.m. Community Service Project
- 12:00 - 12:45 p.m. Closing General Session
- 1:00 p.m. - 2:00 p.m. Opening Session HIADA
- 2:45 - 4:00 p.m. Transportation to airport

TRAVEL INFORMATION

Travel Full Name (Legal Name on ID):

Last Name _____

First Name _____

Middle Initial _____

Date of Birth _____

Gender: Male _____ Female _____

Hawaiian Air # _____

Parent Information:

Parent/Guardian (Please Print)

First Name _____

Last Name _____

Email _____

Contact # _____

Signature _____