St. Philip’s College, Northeast Lakeview College  
and  
San Antonio Alumnae Chapter of Delta Sigma Theta Sorority, Inc.

**EMBODI “Men of Color” Conference**  
Empowering Males to Build Opportunities for Developing Independence

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**A free, positive self-image workshop for young men, grades 6 – 12, and college students**

**Saturday, May 4, 2013**  
**8:00 am – 2:00 pm**  
**St. Philip’s College, 1801 Martin Luther King Dr. – Heritage Room**

*Dress is Casual. Cost is Free.*

**SEATING IS LIMITED. PLEASE REGISTER BY SATURDAY, APRIL 20, 2013**

Email completed registration form to: **mdhrcsat@yahoo.com**
Fax completed registration form to: **(210) 486-9081**

Special invitation to Parents to attend the Organization Fair and General Session *8:00 a.m. to 10:15 a.m.!

*The purpose of the EMBODI “Men of Color” Conference is to provide an informative workshop to young San Antonio men that focuses on the plight of Men of Color through awareness in the areas of career choices, health issues, etiquette, financial literacy, and self-confidence, while recognizing and appreciating the King that resides within.*

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**Develop Independence**

**REGISTRATION FORMS ALSO AVAILABLE AT**

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Registration Deadline: April 20, 2013  

REGISTRATION & PERMISSION FORM  

Participant’s Name_________________________________________________________ Age________  
Address_______________________________________________________________________ Phone______________________________  
City________________ Zip Code________ Email ________________________________  
School ___________________________________________ Grade__________________________  

MEDICAL RELEASE FORM  

Does your son have any allergies to the following:  
Food  No____ Yes ____ What? ____________________________________________________________  
Drugs  No____ Yes ____ What? ____________________________________________________________  
Insect bites  No____ Yes ____ What? ____________________________________________________________  

Is your son currently taking medication?  No _____ Yes ____  
What Medications? ______________________________________________________________________  

Emergency Contact(1)__________________________________________ Phone ________________  
Emergency Contact(2)__________________________________________ Phone ________________  

PERMIT TO PHOTOGRAPH  

As part of the EMBODI program, photography serves as a partial means to fulfill the objectives designed to accomplish goals by showcasing the young men. Some examples include: self-esteem projects, historical record, newspaper and awards. The use of photography will only be used to augment the development of the young men in a very positive and constructive manner. As a result, your permission is needed in order for us to use photography as part of our endeavor. I give the sponsoring organizations permission to publish/display pictures of my son participating in this event. Yes ____ No ____  

NOTICE TO PARENT/GUARDIAN OF SENSITIVE INFORMATION  

Age appropriate information on sensitive issues, such as religious beliefs, human sexuality, cultural and family values, AIDS, sexually transmitted diseases, substance abuse, son abuse, suicide and teen pregnancy are issues that may arise during this workshop. By obtaining your permission, you will allow a healthy interaction that will hopefully provide your son with the confidence needed to come to you, the parent/guardian, for your influence.  

Signature of Responsible Party (MUST be signed by Parent/Guardian) ________________________ Date ________________  

Emergency phone no. where responsible party can be reached at anytime____________________
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COLLEGE STUDENT REGISTRATION and PERMISSION FORM

TO BE COMPLETED BY A COLLEGE STUDENT WHO IS 18 YEARS OF AGE OR OLDER

College Student’s Name________________________________________ Age________
Address________________________________________ Phone_________________
City________________________ Zip Code_________ Email____________________

Select the college you are attending:

△ St. Philip’s College △ Northeast Lakeview College △ Palo Alto College △ San Antonio College

△ Northwest Vista College △ Other ______________________________________

How were you informed about the conference (please circle selection):

(A) Friend  (B) Family  (C) Church  (D) Flyer  (E) Other _________________

PERMIT TO PHOTOGRAPH

As part of the EMBODI program, photography serves as a partial means to fulfill the objectives designed to accomplish goals by showcasing the young men. Some examples include: self-esteem projects, historical record, newspaper and awards. The use of photography will only be used to augment the development of the young men in a very positive and constructive manner. As a result, your permission is needed in order for us to use photography as part of our endeavor.  I give the sponsoring organizations permission to publish/display pictures of my son participating in this event.  Yes ___ No ___

________________________________________
Signature of Responsible Party (MUST be signed by Parent/Guardian if under 18)

________________________________________
Date

Emergency phone no. where responsible party can be reached at anytime ________________________________