

Save The Date

August 13-15, 2009
Richmond Marriott
Downtown

500 E. Broad Street; Richmond, VA 23219

Community Builders Network of Virginia 6th Annual Statewide Conference

ABOUT US The Community Builders Network of Virginia (known as The Network) is a collaboration of youth and adults working in partnership to make positive changes in our communities. The Network provides a framework for organizations to expand the delivery of effective prevention strategies throughout Virginia.

SPONSORED BY The Virginia Department of Mental Health Mental Retardation and Substance Abuse Services, The Governor's Office for Substance Abuse Prevention, and The Virginia Tobacco Settlement Foundation.

IN COLLABORATION WITH Virginia Commission on Youth, Virginia Mentoring Partnership, Voices for Virginia's Children (Kids Count), and Hampton-Newport News Community Services Board.

Register Early

For general information:

Info@TheNetworkVA.com

Community Builders Network of Virginia
c/o H-NNCSB Prevention Services
300 Medical Drive, 2nd Floor
Hampton, Virginia 23666
Phone: 757.788.0010 Fax: 757.788.0967
www.TheNetworkVA.com

E-MAIL US FOR SPECIFIC INFORMATION ON:

Registration & Scholarships
VEley@hnnscsb.org

Exhibitors, Sponsors, & Ads
VLaRue@TheNetworkVA.com

Call for presenters
Presenters@TheNetworkVA.com

CONFERENCE FOCUS

- ✦ **The Latest Research on Risks Concerning VA's Youth**
- ✦ **Youth Leadership Development**
- ✦ **Building Effective Coalitions**
- ✦ **Advanced Cultural Diversity**
- ✦ **Strategic Community Planning**
- ✦ **Collaboration**
- ✦ **Program Evaluation/
Demonstrating Effectiveness**
- ✦ **Policy Change and Legislative
Advocacy**
- ✦ **Networking**

Discount for registering before July 31st:
Members, \$175
Non-Members, \$215
After July 31st: \$250

Hotel Room Reservations: \$99 rate
available until July 31st. Call 1.800.228.9290

Parking: \$8.50 parking coupon available to
attendees using the 5th and Marshall
parking deck.

Schedule of Events

THURSDAY, AUGUST 13, 2009

9:30 am – 4:00 pm	Registration & Exhibits Open
10:00 am – 11:30 am	SESSION 1
11:30 am – 12:30 pm	PLENARY SESSION 2 & LUNCH
12:30 pm – 2:00 pm	SESSION 3
2:00 pm – 2:15 pm	Break & Visit Exhibits
2:15 pm – 5:00 pm	SESSION 4
5:00 pm – 5:30 pm	The Network Welcome Reception (hors d'oeuvres)
5:30 pm – 6:30 pm	The Network Board Members' Meeting
6:30 pm – 9:30 pm	Youth Social

FRIDAY, AUGUST 14, 2009

8:00 am – 8:45 am	Registration & Exhibits Open/ Continental Breakfast
8:45 am – 10:45 am	SESSION 5
10:45 am – 11:00 am	Break & Visit Exhibits
11:00 am – 12:00 pm	PLENARY SESSION 6
12:00 pm – 1:15 pm	PLENARY SESSION 7 & LUNCH
1:15 pm – 3:00 pm	SESSION 8
3:00 pm – 3:10 pm	Break & Visit Exhibits
3:10 pm – 5:00 pm	SESSION 9
5:00 pm – 5:30 pm	Regional Caucuses
5:30 pm – 6:30 pm	Dinner/ Officer Elections
7:00 pm – 10:00 pm	Youth Activities

SATURDAY, AUGUST 15, 2009

9:00 am – 10:00 am	Continental Breakfast
10:00 am – 1:00 pm	Brunch/ New Officer Induction/ Business Meeting

**Schedule may change*

Submitting Materials for Conference Packets

Registrants may submit promotional brochures/flyers (minimum: 250 count) to be included in conference packets.

The deadline to submit materials is August 6, 2009. (The Network reserves the right to not use material that is not consistent with its mission).

Cancellations / Refunds

There is a \$50.00 administrative fee for cancellations. Cancellations must be in writing and received by August 6, 2009.

No refunds will be made after August 6, 2009, or for no shows.

Hotel & Parking Information

The Marriott Richmond Hotel is located at 500 E. Broad Street in Richmond, VA 23219. We have a special discounted room rate of \$99 until July 31st. Call 1.800.228.9290 to make your reservation. The direct number to the hotel is 804.643.3400. Check-in is at 4pm and check-out is at noon.

Conference attendees will receive a discounted parking coupon to pay \$8.50 per car. *This coupon is only valid to attendees using the 5th and Marshall parking deck.*

Fees

REGISTRATION

Registration fees include Conference materials, Thursday's lunch & Welcome Reception, Friday's continental breakfast, lunch & dinner, and Saturday's brunch.

Registrants receive a discount for registering before July 31st. Members of The Network pay \$175 and Non-Members pay \$215. After July 31st, the price per person increases to \$250 for all registrants.

LUNCH ONLY

Thursday, August 13, 2009
Plenary & Lunch
(11:30 am – 12:30 pm)
\$30 per person

Friday, August 14, 2009
Plenary & Lunch
(11:00 am – 1:15 pm)
\$30 per person

Officer Elections 2009

The adult and youth offices of 2nd Vice President, Secretary, and Treasurer will stand for two-year terms beginning in August, 2009. Each region will be selecting representatives during the conference as well. Youth officers & reps must be between the ages of 13-19. To submit a candidate for the 2009 election, please include the following information:

1. Name of candidate, member organization, and desired position (include address, phone, and e-mail)
2. Identify whether the candidate is a youth or an adult and whether or not the candidate is currently in an office (indicate position)
3. If elected, what knowledge, skills, and attributes will the candidate bring to the Network?
4. Attach a resume' or brief biography - no more than one (1) page.

E-mail candidate information to:

Clover Watson
Department of Human Services,
Prevention Services
289 Independence Boulevard
Pembroke 3, Suite 109
Virginia Beach, VA 23462
cwatson@vbgov.com
Phone: 757.385.0823

2nd VICE PRESIDENT

- ✚ Maintain coalition activity records.
- ✚ Serve as chairperson of the Program Committee.
- ✚ Keep a copy of *Robert's Rules of Order Newly Revised* available at each meeting.
- ✚ Rule on all questions of parliamentary conduct at Network meetings.

TREASURER

- ✚ Acquire necessary paperwork to become bonded.
- ✚ Keep an accurate record of all income and expenses of the Network's bank account and issue receipts.
- ✚ Disburse funds approved by the Board of Directors.
- ✚ Provide a financial report at each Board of Directors meeting.
- ✚ Provide an annual budget report at the annual conference.
- ✚ Co-signs deposits or withdrawals of funds and all other procurement functions.
- ✚ Procurement requests will require approval by both the President and Treasurer.

SECRETARY

- ✚ Maintain an up-to-date roster of coalitions, voting members, and alternates.
- ✚ Maintain member attendance and activity records.
- ✚ Serve as chairperson of the Credentials Committee.

REGIONAL REPRESENTATIVES

- ✚ Present their regions' needs priorities and strategies to the Board of Directors at the August board meeting.
- ✚ Serve as resources to other coalitions in their region through networking and information exchange.
- ✚ Facilitate the planning of regional meetings, as necessary. Disseminate information to member coalitions in their region.
- ✚ Will recruit other coalitions from their region to join the Community Builders Network of Virginia.
- ✚ May determine the regions organizational structure, goals and infrastructure as needed.
- ✚ The Network will support the efforts of Regional Representatives, but will not determine what action steps they will initiate.

* The candidate selection process will begin at 5:00 pm on Friday, August 14, 2009.

CONFERENCE REGISTRATION

The Network's 6th Annual Conference August 13-15, 2009

Name of Organization _____

Mailing Address _____

City _____, State _____ Zip Code _____

Phone _____ E-mail _____

**REGISTER &
PAY BY
CREDIT CARD
ON-LINE**

Each organization is responsible for the actions and safety of their members during the conference.

Paying By Credit Card? Register & Pay On-Line at: www.TheNetworkVA.com/conference2009

PLENARY & LUNCH ONLY:

Name _____

vegetarian meal

Thursday, August 13, 2009
(11:30 am – 12:30 pm)

\$30

Friday, August 14, 2009
(11:00 am – 1:15 pm)

\$30

FULL CONFERENCE REGISTRATION*:

1. (Adult) _____

vegetarian meals

ATTENDING
THURSDAY?

Members*

\$175

Non-
Members*

\$215

LATE
REGISTRATION
After July 31, 2009

\$250

ADULTS OR YOUTH (ages 13-17) circle one:

2. _____ Youth/Adult

vegetarian meals

\$175

\$215

\$250

3. _____ Youth/Adult

vegetarian meals

\$175

\$215

\$250

\$ _____

\$ _____

\$ _____

Need more lines? Use a second registration form.

Registration Total: \$ _____

***REGISTRATION FOR THE FULL CONFERENCE INCLUDES:** Conference materials, Thursday lunch & welcome reception, Friday lunch & dinner, and Saturday brunch.

Please Note: Payment must be received in order to be considered registered. If paying by credit card, you may register & pay on line at: www.TheNetworkVA.com/conference2009

There is a \$50.00 administrative fee for cancellations. Cancellations must be in writing and received by August 6, 2009. No refunds will be made after August 6, 2009, or for no shows.

Hotel Room Reservations:

\$99 rate available until July 31st. Call
1.800.228.9290

Parking:

\$8.50 parking coupon available to attendees
using the 5th and Marshall parking deck.

PAYMENT INFORMATION: Make checks or money orders payable to the Community Builders Network of Virginia (EIN # 41-2221679) & send along with registration form to:

The Network Conference Registration
Attention: Vanessa Eley
300 Medical Drive, 2nd Floor; Hampton, Virginia 23666
Phone: (757) 788-0053; Fax: (757) 788-0967
E-mail: veley@hnnscsb.org

EXHIBITS, SPONSORS, & ADS

The Network's 6th Annual Conference August 13-15, 2009

For more info, contact Vrenda Parker-LaRue at (757) 788-0016 or e-mail VLarue@TheNetworkVA.com.

Name of Business/Organization _____

Mailing Address _____

City _____, State _____ Zip Code _____

ADS FOR PROGRAM BOOKLET:

Ads must be received no later than August 6, 2009. Ads may be e-mailed to VLarue@TheNetworkVA.com.

Please Check One: \$100 Full Page Ad \$50 Half Page Ad \$25 Quarter Page Ad

Ad Total: \$ _____

SPONSORSHIP & EXHIBITS:

Exhibitors will have one 6 ft. skirted table. Tables must be set up by 9:15 am. You are invited to be our guest at lunch. With each Corporate Sponsorship, an exhibit table will be offered at no charge.

Type of Display (check all that apply):

Exhibit Table (free for sponsors)

___ \$200 for Entire Conference (Thursday & Friday)

___ \$100 for One Day (check one: ___ Thursday ___ Friday) **Exhibit Total: \$ _____**

Corporate Sponsorship (includes exhibit table for entire conference & a link on www.TheNetworkVA.com)

___ Platinum Sponsorship \$2,500 or more (includes full page ad in program book & 4 conference registrations)

___ Gold Sponsorship \$1,500 (includes full page ad in program book & 3 conference registrations)

___ Silver Sponsorship \$1,000 (includes half page ad in program book & 2 conference registrations)

___ Bronze Sponsorship \$500 (includes quarter page ad in program book & 1 conference registration)

Sponsorship Total: \$ _____

Contact(s) Responsible for Setting Up Display: 1) _____ Staying for lunch? Yes No

2) _____ Staying for lunch? Yes No

Primary Contact's Phone: _____ Contact Person's E-mail: _____

Briefly describe what your business/organization will be promoting: _____

CHECK ALL THAT YOU ARE BRINGING FOR YOUR DISPLAY:

Slide or Video Presentation (with sound)

Slide or Video Presentation (without sound)

Floor display behind table

Floor display next to table

Table top display

Highly Interactive

Banner (Banners can not be placed on

Special set up needs (ie. electrical outlet): _____

hotel wall. Exhibitors must provide their _____

own hanging mechanisms.) _____

PAYMENT INFORMATION: Make checks or money orders payable to the Community Builders Network of Virginia (EIN # 41-2221679). Send form along with payment to:

The Network Conference Registration Attention: Vanessa Eley

300 Medical Drive, 2nd Floor; Hampton, Virginia 23666

Phone: (757) 788-0053; Fax: (757) 788-0967; E-mail: VEley@hnnscb.org

APPLICATION TO PRESENT

The Network's 6th Annual Conference August 13-15, 2009

The Community Builders Network of Virginia invites you to share your expertise on **Thursday, August 13-15, 2009**, at our 6th Annual Conference. This year's conference will be held at the Richmond Marriott Downtown. Presenters representing all areas of prevention are welcome to apply. Prevention as outlined by the Governor's Office on Substance Abuse Prevention, is a theoretical framework, constantly being tested by research, to intervene early in the lives of children and youth to stop negative behavior before it starts. Using this description, we are looking for workshops that will:

- bring together the key leaders in a community, including a diverse planning team representing all disciplines;
- show individuals how to develop a shared vision for what the community should look like;
- teach people how to use data to identify the risk and protective factors in the community;
- help organizations work towards identifying the community's existing assets and gaps in services;
- show the benefits of using evidence-based strategies to meet the identified needs; and
- provide tools for conducting ongoing evaluation of strategies and community needs.

Other workshop topics may include: Social Marketing, Building Youth Leadership, Developing Workers in the Field of Prevention, Policy Change and Legislation, Cultural Sensitivity as well as Cultural Diversity, Prevention Ethics, and other related topics.

Presenters are considered volunteers and will receive a complimentary lunch on the day of their respective session. If you register for the conference and present, you will receive \$50 off your conference registration. Each presenter is responsible for providing handouts at his/her session and should be prepared with a minimum of 30 copies. After the application is submitted and reviewed, the main presenter will be notified concerning whether or not the application was accepted.

Notification of acceptance will be emailed to the main presenter. The main presenter will serve as the primary contact person for your session. E-mail applications to Presenters@TheNetworkVA.com or fax them to (757) 788-0967, attention: Ashleigh Dennis-Silas.

Please include the cover sheet with each entry.

APPLICATION TO PRESENT

The Network's 6th Annual Conference August 13-15, 2009

E-mail applications to Presenters@TheNetworkVA.com or fax them to (757) 788-0967, attention: Ashleigh Dennis-Silas.

COVER SHEET

MAIN PRESENTER

First Name:	
Last Name:	
Title/Position:	
Organization:	
Address:	
City:	
State:	
Zip Code:	
Telephone:	
E-mail:	

CO-PRESENTER

First Name:	
Last Name:	
Title/Position:	
Organization:	
Address:	
City:	
State:	
Zip Code:	
Telephone:	
E-mail:	

Which days are you available to present? (check all that apply)

Thursday, August 13, 2009 Friday, August 14, 2009

Please select the length of your session?

1.5 hours 3 hours 6 hours

I am able to adjust my presentation to meet the needs of the organization.

Session title: _____

Checklist—Attach the following to this cover sheet:

<input type="checkbox"/>	RESUME'
<input type="checkbox"/>	ONE PROFESSIONAL REFERENCE (Must be someone who has utilized you in a training capacity)
<input type="checkbox"/>	SESSION DESCRIPTION (If selected, this will be used in the conference registration booklet)
<input type="checkbox"/>	BIOGRAPHY

Please identify your room setup & equipment needs.

<input type="checkbox"/>	THEATRE SEATING	<input type="checkbox"/>	PODIUM & MICROPHONE
<input type="checkbox"/>	CLASSROOM SEATING	<input type="checkbox"/>	LCD PROJECTOR
<input type="checkbox"/>	PODIUM WITH MICROPHONE	<input type="checkbox"/>	OVERHEAD PROJECTOR
<input type="checkbox"/>	STAND FOR FLIP CHART	<input type="checkbox"/>	SCREEN
<input type="checkbox"/>	TV/VCR	<input type="checkbox"/>	6 FOOT SKIRTED TABLE IN FRONT OF ROOM
<input type="checkbox"/>	TV/DVD	<input type="checkbox"/>	SMALL TABLE

<input type="checkbox"/>	OTHER (Please specify)
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SCHOLARSHIP INFORMATION

The Network's 6th Annual Conference August 13-15, 2009

Please Keep This Page for Your Records.

- + To be eligible for a scholarship, applicants must be either a youth or a participant in a Community Services Board Prevention Planning Coalition.
- + One application per coalition/organization (not to exceed 3 individuals).
- + Scholarship recipients:
 - Will pay a reduced registration fee of \$75
 - Will attend Thursday AND Friday workshop sessions
 - Will have all conference meals at no charge
 - May receive a hotel room at no charge for Thursday night (August 13, 2009) and for Friday night (August 14, 2009)— Hotel accommodations are available for those living more than 50 miles from conference site.
- + Fax, e-mail, or mail the Scholarship Application to:
The Network Conference Registration
Attention: Vanessa Eley
300 Medical Drive, 2nd Floor; Hampton, VA 23666
Fax: 757.788.0967 Phone: 757.788.0053
E-mail: VEley@hnnscsb.org

PLEASE NOTE:

If selected, scholarship recipients will be asked to mail the reduced registration payment of \$75 in the form of check or money order. *Selected participants will not be considered registered until payment has been received.*

If selected, you will be responsible to reserve your own hotel room no later than July 31, 2009. Reservations made after that time will NOT be covered. When reserving rooms for youth, make sure that their rooms are next to you. Whenever possible, double occupancy for youth of same gender (ie. female youth with female youth). The payment of the hotel room (+ tax) will be covered by your scholarship. Any and all incidental charges will be covered at your expense.

Applicants will be notified within 7 business days from the receipt date regarding the status of their application. Selected participants are chosen on a first come, first served basis.

SCHOLARSHIP APPLICATION

The Network's 6th Annual Conference August 13-15, 2009

Name of Organization _____

Mailing Address _____

City _____, State _____ Zip Code _____

Phone _____ E-mail _____

If sending adults, please name the Community Services Board your Prevention Planning Coalition is affiliated with _____

Each organization is responsible for the actions and safety of their members during the conference.

SCHOLARSHIP REGISTRATION*:

ADULTS OR YOUTH (ages 13-17)

circle one:

ATTENDING
THURSDAY?

SCHOLARSHIP
REGISTRATION*

1. _____ Youth/Adult \$75

vegetarian meals

If a youth, your chaperone registered for the conference is _____

2. _____ Youth/Adult \$75

vegetarian meals

If a youth, your chaperone registered for the conference is _____

3. _____ Youth/Adult \$75

vegetarian meals

If a youth, your chaperone registered for the conference is _____

Scholarship Registration Total: \$ _____

***REGISTRATION FOR SCHOLARSHIP RECIPIENTS INCLUDES:** Conference materials, Thursday lunch & welcome reception, Friday lunch & dinner, Saturday brunch, and hotel accommodations for those living more than 50 miles from conference site.

DESCRIBE YOUR ORGANIZATION'S INVOLVEMENT IN THE HEALTHY DEVELOPMENT OF CHILDREN, YOUTH, AND FAMILIES (OR YOUTH-RELATED ACTIVITIES/PROJECTS IN WHICH YOU PARTICIPATE).
