Reconciliation Through Film YOUTH SPEAK!

REGISTRATION FORM

Name:		
Address:		
Phone:	Email:	
Date of Birth - Year:	Month/Day:	
Food allergies? Yes 🖵 No 🖵 Die	etary restrictions? Yes 🖵 No 🖵 🏻 Details:	
I am applying to: ☐ Prince Albert Inn, March 8 & 9, 2 ☐ Regina Travelodge, March 13 & 1	2017 Saskatchewan (Prince Albert and cor	or residents of/those originally from northern mmunities north), while the Regina session is n communities south of Prince Albert.
How do you define your ethnic/cultural identity?		VIDEO EDITING
Do you have a valid driver's licence? Yes 🔲 No 🖵		Please indicate if you have a smart- phone capable of recording video, with
Are there any barriers that might prevent you from attending the seminar? (Work, travel, etc. Note that the OTC will cover travel and meal expenses for participants.)		enough available memory to download an editing app and record video:
		Yes No (Note that applicants without a phone
Can you commit to attending and actively participating for two full days? Yes 🖵 No 🖵		
The future of Canada and reconcili	is interested in your opinions regarding: iation. What would you like to see for your gr included as part of the final selection process for	
•	t in the OTC Youth Reconciliation through Film Proj nding the full two-day agenda and that I may be as	
Signature:		

^{*} Participants will be notified if selected by March 1. Participants will be chosen in part by a desire for diversity and regional representation.*