



October 24, 2011
Potsdam, New York

REGISTRATION

You are invited!

GardenShare invites schools from across the Adirondack–North Country region to send teams of young people and adults who have a passion to explore the crucial food issues of our day. Every high school is invited to participate, but space is limited and preregistration is required.

What will the school teams do at the Youth Summit?

After a morning of dynamic presentations and interactive workshops, each team will meet to devise an action plan describing three to five food-related activities or commitments to implement when returning to their schools. Teams can choose from a menu of suggestions or design their own activities.

What will the teams do after the Youth Summit?

Teams are encouraged to implement their chosen action plans over the course of the school year and provide periodic progress reports to GardenShare for distribution to the other teams.

How can my school participate?

- *First*, identify a team of people to represent your school. School teams must be comprised of three to six students (from grades 9, 10, 11, or 12) and two adults. The adults should include at least one teacher. The second adult should be someone (teacher, parent, staff person, administrator, school board member) involved with food at your school—for example, the school's food service, garden, or ag program. All team members should show an active desire to explore today's food issues and a commitment to bring new ideas and practices back to their schools.
- *Second*, print and complete the attached registration form. Mail it to

GardenShare, PO Box 516, Canton NY 13617.

Questions?

For further inquiries, email summit@gardenshare.org or call GardenShare at (315) 261-8054.



GardenShare ~ PO Box 516 ~ Canton NY 13617 ~ (315) 261-8054 ~ GardenShare.org



Registration Form ~ Food Day Youth Summit ~ October 24, 2011

School Name: _____

School Mailing Address: _____

City: _____ NY Zip: _____

School Telephone with Area Code: _____

Team Leader/Teacher (Adult #1)

Name: _____

Phone/Area Code: _____ Email: _____

Teaching Position: _____

Adult #2

Name: _____

Telephone/Area Code: _____ Email: _____

Connection with food issues at your school: _____

Student #1

Name: _____ Circle grade: 9 10 11 12

Student #2

Name: _____ Circle grade: 9 10 11 12_

Student #3

Name: _____ Circle grade: 9 10 11 12

Student #4 (optional)

Name: _____ Circle grade: 9 10 11 12

Student #5 (optional)

Name: _____ Circle grade: 9 10 11 12

Student #6 (optional)

Name: _____ Circle grade: 9 10 11 12

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Mail this form to: GardenShare
PO Box 516
Canton NY 13617