



CASL REGISTRATION FORM CHECKLIST



Did you know as a CADA member your school delegates are automatically members of CASL?

Before mailing in your registration form please be sure you have double checked all the following to ensure you have properly completed your CASL Conference registration form.

Incomplete forms may delay the process of your registration.

- Receive **School Board Approval** if necessary
- Current CADA/CASL membership (REQUIRED):** Individual \$150 or School \$300
- Registration form/Insurance/Medical Information** for each student filled out completely with parent/guardian signature
- Special Meal Requests:** Each registration form designates yes or no for **vegetarian**
- Make sure each registration/medical form has **student's signature**
- Make sure each registration/medical form has **advisor's signature**
- Make sure each registration/medical form has **parent/guardian signature**
- Indicate requested **shirt size** for each student by **circling** it on registration form + rooming list
(If not indicated, default size is an Adult Medium)
- Each student is listed in the **rooming list** – *if sharing with another school, your registration will not be finalized until all forms from all shared schools are received (may delay registration)*
- A completed **registration form** for each advisor
- Each attending advisor is listed in the **rooming list**
- The proper amount for **payment** is included – **No Purchase Orders**

Please **DO NOT** send payment separately from your forms.

This event has sold out historically. Please note registration is based on a first-paid, first-serve basis with completed paperwork and full payment required at the time of submission.

For questions on CADA/CASL membership, rooming, and registration please contact:

Call CADA Central at 831.464.4891
or email info@cada1.org

For questions on Meet the Pros, CASL State Board Elections, Scholarships, CASL Conference curriculum contact:

Sandi Kurland by phone at 619.957.9107
or email leadership@cada1.org

Dates to remember:

Early Bird Cut-Off: Registrations postmarked by **January 12, 2024 (NO REFUNDS, NO EXCEPTIONS)**

Regular Registration Cut-Off: Registrations must be postmarked no later than **February 16, 2024**

Registration Cut-Off: Registrations must be postmarked no later than **March 15, 2024**

Cancellation & Refund Cut-Off: Request must be received by **March 15, 2024**

Substitution Cut-Off: All forms for substitute delegates must be received by **March 22, 2024**



ROOMING LIST COVER SHEET CASL 2024

THIS IS A FILLABLE FORM ONLINE YOU CAN PRINT!



DELEGATION NAME: _____

Advisor: _____ Cell Phone: _____

Sharing rooms with another school: No Yes School(s) sharing with: _____

Arriving at the conference by: Bus Car If arriving by bus, will you be willing to use your bus for the offsite event? Yes No

First time to CASL? Yes No Email: _____

Is your CADA Membership current? (MEM REQUIRED) Yes No, need to renew/join \$150 Individual Member \$300 School Membership

Address: _____ Work Phone: _____

City: _____ State: _____ Zip: _____

Total # of Rooms: _____ Total # of Advisors: _____ Total # of Students: _____

Total # Vegetarians: _____ # T-shirts: Small: _____ Medium: _____ Large: _____ XL: _____ XXL: _____ Area: _____

This sheet is the cover and must be accompanied by all completed student and advisor paperwork together with full payment.

Please assign your students & advisors to rooms in the boxes below. CASL pricing is based on room cost, so filling the rooms is in your best interest.

	Early Rate* (No Refunds)	Regular Rate	Late Rate
Student Prices:	Postmarked by 1/12/24	Postmarked by 2/16/24	Postmarked by 3/15/24
4 to a room	\$425/person	\$450/person	\$475/person
3 to a room	\$450/person	\$475/person	\$500/person
2 to a room	\$500/person	\$525/person	\$550/person
1 to a room	\$600/person	\$625/person	\$650/person

	Early Rate* (No Refunds)	Regular Rate	Late Rate
Advisor Prices:	Postmarked by 1/12/24	Postmarked by 2/16/24	Postmarked by 3/15/24
2 to a room	\$400/person	\$425/person	\$450/person
1 to a room	\$525/person	\$550/person	\$575/person

* By Registering for the early rate, you understand there are no refunds/no exceptions. If you want the option to cancel and get a refund delegates should register at the regular or late rate. See Page 2 for our refund/cancellation policies.

STUDENTS

ROOM 1	Room Type: <input type="checkbox"/> Boys <input type="checkbox"/> Girls	T-Shirt Size	Reg. Form Enclosed	Payment Amount
Student 1:			<input type="checkbox"/>	\$
Student 2:			<input type="checkbox"/>	\$
Student 3:			<input type="checkbox"/>	\$
Student 4:			<input type="checkbox"/>	\$

ROOM 3	Room Type: <input type="checkbox"/> Boys <input type="checkbox"/> Girls	T-Shirt Size	Reg. Form Enclosed	Payment Amount
Student 1:			<input type="checkbox"/>	\$
Student 2:			<input type="checkbox"/>	\$
Student 3:			<input type="checkbox"/>	\$
Student 4:			<input type="checkbox"/>	\$

ROOM 2	Room Type: <input type="checkbox"/> Boys <input type="checkbox"/> Girls	T-Shirt Size	Reg. Form Enclosed	Payment Amount
Student 1:			<input type="checkbox"/>	\$
Student 2:			<input type="checkbox"/>	\$
Student 3:			<input type="checkbox"/>	\$
Student 4:			<input type="checkbox"/>	\$

ROOM 4	Room Type: <input type="checkbox"/> Boys <input type="checkbox"/> Girls	T-Shirt Size	Reg. Form Enclosed	Payment Amount
Student 1:			<input type="checkbox"/>	\$
Student 2:			<input type="checkbox"/>	\$
Student 3:			<input type="checkbox"/>	\$
Student 4:			<input type="checkbox"/>	\$

ADVISORS

ROOM 1	T-Shirt Size	Reg. Form Enclosed	Payment Amount
Advisor 1:		<input type="checkbox"/>	\$
Advisor 2:		<input type="checkbox"/>	\$

ROOM 2	T-Shirt Size	Reg. Form Enclosed	Payment Amount
Advisor 1:		<input type="checkbox"/>	\$
Advisor 2:		<input type="checkbox"/>	\$

PAYMENT INFORMATION: PAYMENT TOTALS:

Failing to provide required materials/incomplete forms & full payment may significantly delay your registration. Registrations are not guaranteed without payment.

NO PURCHASE ORDERS ACCEPTED

Check (payable to CADA) Visa MasterCard Amex

Credit Card #: _____ CVC: _____

Name on Card: _____ Exp Date: _____

Signature: _____

Billing Street: _____ Billing Zip: _____

Student Room 1:	\$
Student Room 2:	\$
Student Room 3:	\$
Student Room 4:	\$
Advisor Room 1:	\$
Advisor Room 2:	\$
Membership Dues	
GRAND TOTAL:	

CADA / CASL Membership Application

You must be a current CADA/CASL member to attend the CASL Conference. If you or someone at your school are not currently a member of CADA/CASL, please visit www.CADA1.org/joincada to download the membership application. Complete and submit the form with payment at the same time as your CASL Conference Registration or join/renew online by signing into your account. Attendees located outside the state of California do not need to be CADA/CASL members to attend.

CASL Conference Policies

1. **Registration:** Accepted on a space-available basis only. We sell out, so register early to guarantee your spot. CADA/CASL will not be held responsible for any lost or stolen items, personal property accountability is the responsibility of every student, faculty, and staff. Each individual must take reasonable precautions to protect his or her personal property. *A delegation is a delegate or group of delegates under the supervision of one (or more) advisor associated with a single delegation name consisting of one or more schools.
2. **Delegation Size Limit:**
 - a. **Over 8 students (3 rooms) 1 Advisor required.**
 - b. **Over 12 students (4 rooms) 1 Advisor required.**
 - c. **Over 16 students (5 rooms +) 2 Advisors required.**
 - d. **If over 16 students, you must call Sandi Kurland (619) 957-9107 or email leadership@cada1.org**
3. **This is a residence program only.** All participants are required to stay in the conference hotel with the rest of the delegates. **No Exceptions.**
4. **Assigning Roommates:** To keep the costs down, you may want to fill each room. **Please note CADA/CASL does not coordinate sharing of rooms.** Suggestions:
 - a. Find more kids at your school who may not already be active but are interested in leadership.
 - b. Look outside of your school to other schools in your city, district, Area, etc. **(If you are sharing rooms with another school, it may cause delays in the registration process and may cause delays onsite with room key assignments.) Please note CADA/CASL does not coordinate sharing of rooms.**
 - c. **Please Note:** If students are rooming two to a room, the room layout may be a king bed only. For students rooming three to a room, the room layout may be a king bed with a rollaway.
 - d. **Please Note:** We will attempt to room advisors near their students; however, it is possible that advisors may not be roomed next to their students.
5. **Adult/Student Room Sharing:** The only circumstance under which an adult and student may share a room is if they are parent and child. **No exceptions.**
6. **Lodging:** The 2024 CASL Conference will be held at the Ontario Doubletree Hotel and the Ontario Convention Center. Lodging will be held at the Doubletree Hotel and possibly overflow hotels depending on attendance. Registration price includes hotel for two nights. Housing will be assigned on a first-come first-serve basis. Delegates will be placed in a hotel based on the order of registration receipt. Completed registration forms and payment are required to be considered registered.
7. **Transportation:** The closest airport is the Ontario International Airport which is a short 5-minute drive from the hotel/convention center. Round-trip shuttles are available by the Doubletree Hotel. Parking at the Ontario Doubletree is \$15/day - attendees who are driving will be expected to make arrangements with the hotel to pay for their parking.
8. **Important Registration Dates:**
 - a. Early Bird Cut-Off: Registrations postmarked before January 12, 2024, to receive the discounted rate. No refunds/no exceptions.
 - b. Regular Rate Cut-off: Registrations postmarked before February 16, 2024, to receive the discounted rate.
 - c. Registration Cut-off: Registrations postmarked before March 15, 2024
 - d. Refund Cut-Off: Request must be received by March 15, 2024
 - e. Registration Cut-Off: Registrations must be postmarked no later than March 15, 2024
 - f. Substitution Cut-Off: All forms for substitute delegates must be received by March 22, 2024
 - g. Conference Times: Onsite check-in is from 10 am to noon and the conference ends at 12:30 pm on the last day
9. **Conference Payments:**
 - a. CADA is not able to process Purchase Orders – **Absolutely NO Purchase Orders will be accepted**
 - b. **Full payments only** – no deposits (Credit card or checks payable to CADA)
10. **Cancellations and Refunds:**
 - a. **Cancellations Prior to the Conference** – Refunds may be given with written notice received no later than **March 15, 2024. There are no refunds for anyone who registered at the early rate.** There will be a **\$50 administrative fee per person deducted from your refund.** Please send cancellation requests to info@cada1.org. All attendees must cancel their registration regardless of if payment has been submitted OR NOT – **if you fail to cancel your registration you will be required to pay for your conference registration.**
 - b. **Substitutions** will only be accepted in writing with a replacement delegate. **All substitutes** are subject to a **\$35 administration fee** and must be received by **March 22, 2024, with complete paperwork.** You must provide a delegate of the same gender to replace you and he/she must provide all completed and signed forms. **You are responsible for finding your own replacement delegate.** Please send substitution requests to info@cada1.org.
11. **Return the completed registration form packet:**
 - a. Summary / Rooming List Cover Page
 - b. Registration forms for each delegate and advisor
 - c. Completed CADA/CASL Membership Application, if applicable
 - d. Payments for each delegate, advisor, and membership, if applicable. **Please DO NOT send payment separately from your form.**
 - e. **Submitting incomplete forms or failing to provide required materials & full payment may significantly delay your registration.**
12. **Return the Registration Packet to**

CADA Central
NEW ADDRESS! 7960 Soquel Dr., Ste B112, Aptos, CA 95003
Phone: 831.464.4891 – Fax: 831.576.1515 info@cada1.org



CASL State Conference Registration Medical Release/Registration Form

THIS IS A FILLABLE
FORM ONLINE YOU
CAN PRINT!



First Name: _____ Last Name: _____
 School Name: _____
 Advisor in Charge: _____ Advisor Cellphone: _____
 Parent/Guardian Name: _____
 Parent Contact Phone: _____ Alt. Phone: _____

STUDENT MEDICAL INFORMATION: (students only – not needed for advisors)

Medical Insurance Carrier: _____ Policy #: _____
 Check this box if your student does **NOT** have any Medical Insurance
 My student has a special health need: _____
 My student takes the following medication: _____
 T-Shirt Size (Adult Size): Small Medium Large XL XXL Are you a vegetarian? Yes No

EMERGENCY CONTACT INFORMATION (If parents/guardian cannot be reached)

Name: _____ Relationship: _____ Contact Phone: _____

In the event that my child should need emergency medical treatment while participating on this field trip, I hereby authorize CADA/CASL personnel to use their own judgment in obtaining emergency medical services for him/her. I further authorize any individual selected by CADA/CASL personnel to render such emergency medical treatment to my child as he/she may deem necessary and appropriate. I understand CADA/CASL has no insurance, which pays the medical or hospital costs that might be incurred on behalf of my child. Consequently, I understand any and all such costs shall be my sole responsibility. I understand I indemnify and hold harmless the CADA/CASL, its officials, employees, and agents, including volunteers, from all liability and claims arising out of or in connection with my child's participation in this activity. I fully understand participants are to abide by all rules, regulations and agreements governing conduct during the trip. Any violation of these rules and regulations may result in that individual being sent home at parent's/guardian's expense.

By signing below each student agrees to the following: Parent, guarding, advisor, or public carrier must transport students. Students must NOT drive themselves to the conference. Each student will be under the supervision of a school designated adult who will be responsible for them. Student's designated conference advisor will administer medications if applicable. Delegates will stay in the conference facilities and/or the hotel and participate in the conference activities attending all sessions, activities, and events. Drugs, alcohol, tobacco & other controlled substances are not allowed. This includes possession, use, transport, or sale. Delegates are not allowed to be in the hotel room of any member of the opposite sex. Any delegate who violates any of these agreements may be immediately sent home by public carrier at the parent's expense or detained until the parent/guardian can pick them up. During the course of this CADA/CASL activity, students may be photographed and/or videotaped by the CADA/CASL organization and/or its vendors. These photos and tapes may be used for the promotion of this or other CADA/CASL events and/or its vendors, or for training purposes. In certain cases, students or school advisors may be permitted to photograph students from their own schools. Registration is accepted on a space available basis only. CADA/CASL will not be held responsible for any lost or stolen items, personal property accountability is the responsibility of every student, faculty, and staff. Each individual must take reasonable precautions to protect his or her personal property.

Liability Waiver: By attending our event, you voluntarily assume all risks and accept sole responsibility for any injury related to exposure to COVID-19, and release CADA/CASL from liability for any injury or harm that may result by attending the event. CADA's goal is to ensure a safe meeting environment. As such, you also agree to abide by any prevention or safety measures CADA/CASL, the "facility", and state and local agencies may have in place during the Event. You also agree not to attend the event if you become ill, are aware you've been directly exposed to the COVID-19 virus within two weeks prior to the Event or exhibit any symptoms of the COVID-19 virus prior to or during the Event. You understand in the chance your student tests positive for COVID-19 during the event, the school's advisor, and CADA/CASL staff will be notified immediately. If any student/advisor tests positive, then it will be the responsibility of the school/parent, including any financial obligations, to quarantine, and safely transport the student/advisor back home.

CADA/CASL will not be held responsible for any lost or stolen items, personal property accountability is the responsibility of every student, faculty, and staff. Everyone must take reasonable precautions to protect his or her personal property. **Assumption of Risks:** By registering for this event, I hereby assume all of the risks of participating in all activities at CADA/CASL Events, including but not limited to, any risks that may arise from the negligence or carelessness of CADA/CASL, their subsidiaries, affiliates, directors, officers, employees, partners, contractors, agents, representatives, volunteers, successors and assigns (collectively, the "Host") and/or from dangerous or defective equipment or property owned, maintained, operated or controlled by the Host. I **waive, release, and discharge** the Host from any and all liability, including but not limited to, liability arising from the negligence of the Host or myself, for my death, disability, personal injury, property damage, property theft, or any other damage or actions of any kind which may affect or impact me in any way arising from the Activity. I **indemnify, hold harmless, and promise not to sue** the Host from any and all liabilities or claims made as a result of my participation in the Activity, whether caused by the negligence of the Host, myself, or otherwise.

Parent/Guardian Name – Please print	Parent/Guardian Signature	Date
Advisor Name – Please print	Advisor Signature	Date
Student Name – Please print	Student Signature	Date

Cancellations & Refunds: Cancellations Prior to the Conference – Refunds may be given with written notice received no later than **March 15, 2024**. There will be a \$50 administrative fee per person deducted from your refund. Please send cancellation requests to info@cada1.org.