

CENTRAL COUNCIL Tlingit and Haida Indian Tribes of Alaska

Andrew P. Hope Building 320 West Willoughby Avenue, Suite 300 • Juneau, Alaska 99801

WELLBRIETY TRAINING INSTITUTE: Medicine Wheel & 12 Steps for Youth A Cultural Approach to Personal Recovery for Youth 13-21 Years of Age

LOCATION: Elizabeth Peratrovich Hall

320 W. Willoughby Avenue

Juneau, AK 99801

DATES: October 3- 5, 2017

TIME: 8AM – 5PM

The Central Council of Tlingit and Haida Indian Tribes of Alaska's (Tlingit & Haida) Navigators program would like to extend an invitation to our Southeast Alaska community partners serving youth to register for this important 3-day training event. The White Bison's Wellbriety Training Institute will provide program resources and train community facilitators for the Medicine Wheel and 12 Steps for Youth program – a culturally-based program that gets behind the symptoms of alcohol and drug misuse, focusing on the emotional, mental, physical, and spiritual foundations that cause young people to begin using in the first place. (24 Continuing Edu. Hours/CEH from NAADAC Edu. Provider #64009)

Who Should Attend This Training

- Individuals working in organizations specializing in treatment, recovery and wellness
- Substance abuse prevention specialists
- Behavioral and mental health professionals
- Individuals working in Indigenous communities
- Members of the recovery community
- Educational professionals
- Boys and girls associations
- Community citizens working with youth

What You Can Learn From This Training

- Cultural approaches to healing from addictions and intergenerational trauma
- How to become a Wellbriety facilitator
- How to use the facilitator and participant manuals
- How to facilitate programs in your community
- How to process group discussions
- How to conduct Talking Circles

Contact: Tina DeAsis-Wright, Juvenile Justice Coordinator

Phone: 907.463.7755

Email: tdeasiswright@ccthita-nsn.gov



NAVIGATORS ~ Choosing Life's Direction

REGISTRATION FORM

WELLBRIETY TRAINING INSTITUTE: Medicine Wheel & 12 Steps for Youth A Cultural Approach to Personal Recovery for Youth 13-21 Years of Age

3 Day Training Event Sponsored by Central Council Tlingit & Haida Indian Tribes of Alaska

	Dates: October 3- 5, 2017 Time: 8:00AM – 5:00PM Lunch Provided	Event Coordinator: Tina DeAsis-Wright 907-463-7755 tdeasiswright@ccthita-nsn.gov
Purpose: Train Facilitators to implement cur young people maintain healthy, ba young people life skills and charac	lanced lifestyles free from alcohol	
AGENCY NAME & ADDRESS		DATE
NAME & TITLE		TRIBAL AFFILIATION
EMAIL ADDRESS	BUSINESS PHONE	BUSINESS FAX
Each Participant Will Receive:	Registratio	on Fees:
Three days of training on how to far and implement the program. Toolkit Provided 1 Facilitators Manuel 1 Participants Workbook 1 Instructional DVD Set 1 Implementation Guide	Registration for Friday, 9/15/201 cancellation fee Authorization for	m and fees must be submitted by 17, for Early Bird discount; \$100 applied. Credit Card orm attached. ee after 9/15/2017: \$450
*24 Continuing Ed	u. Hours/CEH from NAADAC F	Edu. Provider #64009
Please complete the participant	profile to help ensure a successfu	ıl training event.
How/are you familiar with the We	llbriety programs?	
Does your agency serve Tribal you		
Does your agency have a cultural of	component?	

What do you hope to gain from this training event?



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Credit Card Payment Authorization Form

By completing and signing this form you authorize Central Council of Tlingit and Haida Indian Tribes of Alaska (Tlingit & Haida) to debit your credit card for the amount indicated on or after the date indicated below.

Please complete the information below:		
I authorize Tlingit & Haida to cha (Print full name)	arge my credit card indicated below	
for on or after This payment is for (Date)	(Description of goods/services/participants)	
Billing Address	Phone #	
City, State, Zip	Email	
Account Type: □ Visa □ MasterCard □ AME	X Discover	
Print Cardholder Name:		
Card Number	Exp. Date	
CVV2 (3 digit number on back of VISA/MC, 4 digits on front	t of AMEX)	
I authorize the above named business to charge the credit form according to the terms outlined above. This payment described above, for the amount indicated above only, and I am an authorized user of this credit card and that I will a card company; so long as the transaction corresponds to the	t authorization is for the goods/services is valid for one time only. I certify that not dispute the payment with my credit	
SIGNATURE	DATE	