

YOUTH INSPIRED

YOUTH DRIVEN

YOUTH LED



THE LONG ISLAND TEEN INSTITUTE

HIGH SCHOOL PROGRAM INFORMATION

DATE:

JANUARY 12-15, 2018
(4 DAYS, 3 NIGHTS)

LOCATION:

QUINIPET CAMP & RETREAT CENTER
SHELTER ISLAND HEIGHTS, NY



***LITI** is a leadership development & substance use/gambling prevention strategies conference for middle & high school students throughout Suffolk County, sponsored by Human Understanding & Growth Services, Inc. (HUGS, Inc.)*

2017-2018 Long Island Teen Institute Program Information

Who We Are

Thank you for your interest in attending **The Long Island Teen Institute (LITI)**, sponsored by Human Understanding & Growth Services, Inc. (HUGS, Inc.) For more than 30 years, HUGS, Inc. has been facilitating this program for high school students in Suffolk County, NY. HUGS is fortunate to receive funding from Suffolk County and NY State Office of Alcohol and Substance Abuse Services (OASAS) to facilitate this, and other important prevention programs each year. Thanks to this support, we can offer our programs at a greatly reduced cost to our participants.

LITI is a weekend-long youth leadership conference for teenagers who have the potential to be agents of change in their communities and schools. We are a charter member of the National Association of Teen Institutes (NATI) – programs like ours are run all over the country! This means young people like you gather all over the country to build leadership skills which promote healthy lifestyles and aid the prevention of alcohol, tobacco, and other drug use. Currently there are 50 Teen Institute conferences operating in 21 states across the USA! You are in great company!

Our mission is to guide young people to realize their potential and empower them to make healthy choices instead of high risk ones. Long Island students know best what challenges exist in their schools and communities; they are the ones who witness it all firsthand. Accordingly, they must be the ones to act if change is desired.

At **LITI**, we dedicate each conference to providing young people with experiences which will help enhance their leadership abilities. Through **LITI**, students have the opportunity to work in equal partnership with dedicated adults to address important issues in their communities and strategize ways to tackle them. We offer a variety of resources that will assist teens to be stronger leaders, good role models for others, and remain alcohol and drug-free. Students leave **LITI** conferences with a sense of confidence, purpose, and motivation that continues on throughout the school year, and throughout their lives.



We are excited to have you join us for what we are sure will be an incredible year of learning and empowerment! Please do not hesitate to contact Alana Marino, our Teen Institute Coordinator, with any questions about **LITI**.

Kym Laube
Executive Director
kym@hugsinc.org

Alana Urbont Marino
Teen Institute Coordinator
alana@hugsinc.org

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The LITI Experience: What to Expect

At LITI, we incorporate some essential elements which allow for a fun and unique experience each conference, but the messages of which also connects to previous and future ones. Read below to discover what you can expect at the next LITI Conference.

Community Group Workshops

At **LITI**, we develop and present workshops which are interactive, entertaining, and educational. These workshops have been carefully chosen as ways to provide participants with additional tools needed to affect change in their schools and communities. Past topics have included: Healthy relationships, the cycle of addiction, the Strategic Prevention Framework (SPF), community action planning, leadership and social inequalities, planning for success in school and life, and taking care of oneself.

Guest Speakers and Presenters

LITI is fortunate to have a network of talented and diverse individuals who come out to our conferences to share their time and wisdom with our participants. These aren't your ordinary public speakers – they use unconventional presentation styles (ex: athletics and basketball, gameshow simulations, and skits) to speak on topics like leadership, resisting peer pressure, self-esteem, diversity, alcohol and other drugs, and relationships. They are experts in their fields and you will learn amazing things from them.

Small Discussion Groups

These small groups, called "Family Groups," provide opportunities to meet new people and have more intimate discussions about topics presented in Community Groups. The goal of Family Group is to analyze and process information in a small group setting that fosters the sharing of individual and collective ideas. These groups consist of 8-12 participants and are facilitated by volunteer staff.

Activities

In teaching about healthy lifestyles, **LITI** understands that taking time to enjoy yourself and have fun are important healthy choices. Activities which promote this include: free-time, dance parties, talent shows, playing games and playing music.

Am I Eligible to Attend LITI?

If you are a High School student who:

- ✓ Is in 9th – 12th grade AND is not currently in need of mental health treatment;
- ✓ Has displayed or has the potential and desire to develop leadership skills;
- ✓ Wants to develop their ability to make sound decisions and improve communication with parents, peers and school personnel;
- ✓ Is proud to be, or is willing to become, alcohol, tobacco, and other drug (ATOD) free;
- ✓ Wants to increase their knowledge of alcohol and other drug use/abuse and how it affects individuals, families and communities;
- ✓ Has good listening skills and will respect others and their opinions;
- ✓ Will reach out to people while still taking good care of yourself;

...then you are DEFINITELY eligible to Attend LITI!!

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Staff & Volunteers Roles at LITI

Student Leaders:

Student Leaders are 11th and 12th grade students who have previously attended **LITI** at least 3 (preferably 4) conferences. Student Leaders are involved with **LITI** at the highest level; They attend staff meetings and trainings; act as a bridge between participants and adults; facilitate Family and Community Group activities; lead energizers; and aid in the program design and prevention planning for HUGS, Inc. and **LITI**.



**Fantastic
Student Leaders!**

Group Facilitators:

Individuals 21 years or older with a high school diploma or equivalent, an enjoyment and knowledge of working with youth, and a desire to help others in the prevention process, can volunteer their time as a Group Facilitator for **LITI**. This provides the opportunity to interact with participants on many levels. Main tasks are to: facilitate family group sessions; monitor dorms, attend community groups, and participate in and oversee free-time activities.

Adult Participants:

Adult Participants are individuals aged 21 and older who have an interest in expanding their knowledge of prevention in Suffolk County as well as their understanding of Teen Institute. Adult Participants are volunteers who attend the program almost identical to the capacity youth do. This program gives adults the opportunity to not only see what happens at **LITI** and how **LITI** has an impact on youth, but also to network with other adults and gain resources about starting or revitalizing prevention programs in their community.

The A-Team:

Volunteers who cannot commit to spending the entire weekend at **LITI**, or who are not a part of Family Group, give of their time on "The A-Team." The A-Team functions to keep conferences going from behind the scenes. These individuals run the kitchen, dining room, and main lodge; they are the hardest working people on the conference weekend and we are eternally grateful to them for what they do! Individuals who volunteer on the A-Team include teachers, community members, and parents of current and/or past **LITI** participants.



**Caring adult
volunteers!!**

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SUGGESTED PACKING LIST

What to Bring to LITI

Bedding & Towels:

- ☐ Pillow, Sleeping bag and/or bed linens and a comforter – beds are twin size.
- ☐ Towel and washcloth

Clothing:

- ☐ Casual, comfortable clothing for the whole weekend (Please plan for the weather!)
- ☐ Comfortable, waterproof, closed-toed shoes – We do use outdoor space and move between buildings all year-round
- ☐ Umbrella, rain/snow gear, Cold weather accessories (hat, gloves, scarf, etc.), heavy coat for winter conferences

Toiletries:

- ☐ Shampoo, conditioner, soap, etc.
- ☐ Flip flops for the shower (suggested)
- ☐ Deodorant
- ☐ Personal care products and items
- ☐ Toothbrush and toothpaste

Miscellaneous:

- ☐ Necessary prescription medications in their original packaging/bottles – MUST be checked in with the TI Coordinator at registration
- ☐ Snacks – peanut free and in sealable packaging please!
- ☐ Camera, iPod, headphones – **LITI** is not responsible for lost/damaged items
- ☐ Reusable water bottle and/or hot drink mug (suggested)
- ☐ A small amount of cash (\$30) to purchase **LITI** promotional products
- ☐ **Something meaningful that represents YOU (Ex: song, poem, photo, jewelry) that you would be willing to share with the group at "Morning Sharing"**
- ☐ A positive attitude, a smile, and an open mind

Things NOT Allowed at LITI:

- ✗ Alcohol, tobacco, or other drugs
- ✗ Weapons of any sort
- ✗ Energy drinks or highly caffeinated drinks
- ✗ Clothing or music which promotes alcohol, drugs, violence, or anything that would be seen as offensive to others
- ✗ Laptops are allowed during free time for homework purposes only, and never during group time. There is no WiFi at Camp Quinipet.
- ✗ iPads, tablets, other electronic devices - – HUGS, Inc. is not responsible for your personal electronics and we strongly suggest you leave them at home
- ✗ Cell phones – We collect them as you arrive on Friday and return them at the close of the conference on Sunday
- ✗ Bad attitudes!

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2017-18 LITI Tuition Information

Cost per Participant - \$175.00

Some schools pay a portion of this. Please check with your designated School Coordinator to confirm your student's price. **No participant will be turned away for inability to pay.** Limited scholarships are available, upon request – please contact your school coordinator or the HUGS office for more information. *Full scholarships are limited to one (1) conference per student per school year.*

CHECKS SHOULD BE MADE OUT TO HUGS, INC.

Please know that, because of continued funding from Suffolk County and NY State OASAS, we are able to offer all participants this reduced fee for LITI conferences. Each person's tuition actually costs \$350/conference.

Emergency Contact Information

To experience LITI to its fullest, student use of cell phones is not permitted. If participants choose to bring their phones, they will be collected at registration for each conference. **HUGS/LITI staff will have their own phones throughout the weekend. In case of an emergency, here is a list of important numbers:**

Kym Laube, Executive Director	(631) 793-2854
Alana Marino, LITI Coordinator	(516) 426-8865
Camp Quinipet Office	(631) 749-0430

Directions to Quinipet Camp & Retreat Center

99 Shore Rd, Shelter Island Heights, NY 11965

Please Note: The North and South Fork ferry companies accept CASH ONLY.

FROM THE SOUTH FERRY/SOUTH FORK OF LONG ISLAND:

South Ferry Address for GPS: 399 Ferry Rd. North Haven, NY 11963

After you get off the ferry, follow Rte 114 North continuing through town. *The road will wind and turn, just keep following it around and through town.* Make a LEFT at the stop sign by the IGA Supermarket. Go 4/10 of a mile (just past the sign that says: Montclair Colony, Crescent Beach, Silver Beach) and turn LEFT onto *West Neck Road*. Follow this road through the four-way stop and down the big hill. The road becomes Shore Road (along the water's edge). Take this along and as the road turns left, Quinipet's entrance will be on your right. **Enter camp and proceed to Willard Lodge on the right.**

FROM THE NORTH FERRY/NORTH FORK OF LONG ISLAND:

North Ferry Address for GPS: 12 Summerfield Place. Shelter Island Heights, NY 11965

After you exit the ferry, follow Rte 114 south for about 1 mile -- watch the sign 114 south, *the road has a couple of turns.* 114 will make a sharp left and West Neck Road is on your right. *A green sign says Crescent Beach.* Turn RIGHT onto West Neck Road, Follow this road through the four-way stop and down the big hill. The road becomes Shore Road (along the water's edge). Take this along and as the road turns left, Quinipet's entrance will be on your right. **Enter camp and proceed to Willard Lodge on the right.**



January 2018
**LONG ISLAND TEEN INSTITUTE
PARTICIPANT APPLICATION**

**PLEASE COMPLETE AND RETURN ALL FOUR (4) PAGES OF THIS APPLICATION,
ALONG WITH PAYMENT (IF APPLICABLE), TO YOUR SCHOOL COORDINATOR
OR TO THE HUGS, INC. OFFICE THREE WEEKS BEFORE EACH CONFERENCE.**

Participant Name: _____

LONG ISLAND TEEN INSTITUTE PARTICIPANT AFFIRMATION:

- ★ *I agree to be a courteous role model and respect the rights of others.*
- ★ *I agree to be on time, and actively participate in all scheduled activities throughout the weekend.*
- ★ *I understand that possession or use of any alcohol, tobacco, marijuana, and other non-prescribed drugs will not be tolerated.*
- ★ *I agree to follow all **LITI** and Camp Quinipet rules.*
- ★ *I understand that inappropriate physical contact or activity connoting sexual intimacy with other participants or staff will not be tolerated.*
- ★ *I agree to not leave the camp area that is designated for the Long Island Teen Institute.*
- ★ *I agree to not operate motorized vehicles without the express permission of an authorized staff member.*
- ★ *I agree to follow the **LITI** code for appropriate dress (general school code).*
- ★ *I agree to comply with all other rules determined by the **LITI** staff as necessary for the successful and safe conduct of the conference.*

As the applicant, I have read the above **LITI** Participant Affirmation, understand, and agree to abide by the guidelines. Compliance with these rules is expected of all participants. I understand that infractions may result in disciplinary action, including possible dismissal from the Long Island Teen Institute. I understand that my agreement to adhere to the above guidelines holds true for any more **LITI** Conferences I attend for the rest of the 2017-18 program year.

I affirm I am currently in 9th-12th grade; have demonstrated leadership potential; have no personal alcohol or other drug problem (or, if in recovery, understand a minimum of one year is suggested); am committed to bettering myself, teaching others to be substance free, and to support prevention projects in my school and community. I also attest I will be able to attend the Long Island Teen Institute conference for the entirety of the length of the specific conference that I am applying for (except in event of emergency).

Participant Signature: _____ **Date:** _____

PARENT/GUARDIAN AFFIRMATION

As parent/guardian, I have read the above **LITI** Participant Affirmation, and understand and agree that my child is capable of abiding by the guidelines. Compliance with these rules is expected of all participants. I understand that infractions may result in disciplinary action, including possible dismissal from the Long Island Teen Institute.

I affirm this applicant is currently in 9th-12th grade; has demonstrated leadership potential; has no personal alcohol or other drug problem (or, if in recovery, understand a minimum of one year is suggested); and is committed to bettering themselves and supporting prevention projects in his/her school and community. I also attest that the participant will be able to attend Long Island Teen Institute for the entirety of the length of the specific conference that he/she is applying for (except in event of emergency).

I understand that supervision of my child begins when he/she officially checks in at **LITI** (no earlier than 3:00pm on Friday for student staff, and no earlier than 5:30pm for participants), and ends at the closing date and time of the conference itself. I accept responsibility for the supervision and transportation to and from the conference. I agree that my child is capable of following the basic rules and guidelines of the Long Island Teen Institute, capable of staying in workshops and groups for the designated time, and capable of having respect for themselves and others.

Parent/Guardian Signature: _____ **Date:** _____



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PARTICIPANT INFORMATION

LAST Name:		FIRST Name:		Preferred Name/Nickname :	
Your Role on this Conference: (Please check ONE) <input type="checkbox"/> NEW Participant <input type="checkbox"/> Returning Participant <input type="checkbox"/> Student Leader					
School Name:		School Coordinator Name:		Guidance Counselor Name:	
Unisex T-Shirt Size: (Please select one) <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large <input type="checkbox"/> 2X-Large <input type="checkbox"/> 3X-Large					
Age:	Date of Birth:	I identify my gender as...	Grade in 2017-18 school year: <input type="checkbox"/> 9 th <input type="checkbox"/> 10 th <input type="checkbox"/> 11 th <input type="checkbox"/> 12 th		
Preferred Pronouns: A pronoun is a word that substitutes for a noun; in this case, a word that substitutes for your name. We want to know what to call you. Please indicate here (Ex: <i>they/them/theirs; she/her/hers; he/him/his, or something else</i>)					
Our funding system requires we gather the following information: Race: (Please check ONE) <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Asian American <input type="checkbox"/> Native American or Alaskan Native <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Multi-Racial <input type="checkbox"/> Other Ethnicity: (Please check ONE) <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino					
Street Address:			Mailing Address: (If Different)		
City:		State:		Zip Code:	
Participant Cell Phone:			Home Phone:		
Participant Email Address:					

PARENT/GUARDIAN CONTACT INFORMATION

Parent/Guardian Name (please print):		Relationship:	
Street Address:		Mailing Address (If Different):	
City:		State:	Zip:
Cell Phone:	Home Phone:		Work Phone:
Parent/Guardian Email Address:			

EMERGENCY CONTACT INFORMATION

Emergency contact persons must be different than the Parent/Guardian listed above

Name:	Relationship:	Primary Phone #:	Alternate Phone #:
Name:	Relationship:	Primary Phone #:	Alternate Phone #:



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HEALTH INFORMATION

ALLERGIES – Please continue on a separate sheet of paper if necessary

NOTE REGARDING NUT ALLERGIES! PLEASE LIST NUT ALLERGIES BELOW, INCLUDING SEVERITY AND REACTION SO WE CAN PREPARE THE KITCHEN AND DINING HALL ACCORDINGLY.

Please list ALL known including ALL foods, medications, insect stings, seasonal, etc.

REACTION

MANAGEMENT

1.

2.

OVER THE COUNTER MEDICATIONS

Permission for LITI Staff to administer OTC Medications

The following medications are stocked by LITI Staff to be used on an as needed basis to manage illness and injury.

PLEASE INDICATE IN THE BOXES NEXT TO THOSE WHICH ARE ALLOWED TO BE GIVEN TO YOUR CHILD:

☐ Acetaminophen (Tylenol)

☐ Diphenhydramine antihistamine/allergy medicine (Benadryl)

☐ Ibuprofen (Advil, Motrin)

☐ Antacid (Tums)

OR CHECK THE FOLLOWING BOX:

☐ I **DO NOT** give permission for any over-the-counter medications administered to my child.

DIETARY RESTRICTIONS & PREFERENCES

Please check off any dietary needs below so we may make proper accommodations in the kitchen:

☐ Vegetarian

☐ Gluten Free/Celiac

☐ Lactose Intolerant (Please note lactose pills as medications below)

☐ Vegan

☐ Kosher

☐ Other _____

PRESCRIPTION MEDICATIONS

Please list **ALL** medications taken routinely. All medication **MUST** be kept in the original packaging/bottle that identifies the prescribing physician, the name of the medication, the dosage, and the frequency of administration.

All medications MUST be turned into LITI Staff upon arrival, and will be held for the duration of the Conference.

PLEASE CHECK ONE: ☐ This participant takes NO medications on a routine basis

☐ This participant takes medications as follows (continue on separate sheet if necessary)

MEDICATION	REASON	DOSAGE	TIME(S)
1.			
2.			

OTHER HEALTH QUESTIONS

Has the participant experienced:	YES	NO		YES	NO
Heart Condition?			Passed out/had chest pains during exercise?		
Ever had surgery?			Mononucleosis ("mono") in the past 12 months?		
Recurrent/chronic illnesses?			Problems with falling asleep/sleepwalking?		
Asthma/wheezing/shortness of breath?			Eating Disorder?		
Blackouts, fainting or dizziness?			Treatment for emotional or behavioral difficulties?		
Diabetes?			Bipolar Disorder?		
Seizures/Epilepsy?			Depression?		
High blood pressure?			Substance Use Disorder?		

Please explain any "Yes" answers, noting dates if applicable: Example: #1- hospitalized 4/07/11 for appendix removal

Is there anything else you'd like to tell us about the participant's health that you think is important or that may affect his/her ability to fully participate in the LITI Leadership Conference?



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PARTICIPANT APPLICATION

CONSENT AND RELEASE OF LIABILITY

PARTICIPANT NAME:

A. CONSENT FOR ATTENDANCE

I, the undersigned parent/guardian, hereby give permission for the above participant to attend the **LITI** Leadership Conference at Camp Quinipet in Shelter Island Heights, NY.

B. MEDICAL AND INSURANCE INFORMATION

I, the undersigned parent/guardian, agree to pay any medical bills (independently or through insurance) that may arise as a result of injuries incurred at the **LITI** Leadership Conference.

- ☐ The participant is not covered by medical insurance.
☐ The participant is covered by the following insurance policy:

Primary Physician Name:

Physician Phone #:

Insurance Company Name:

Policy Holder:

Policy Number:

Group Number:

C. MEDICAL CONSENT

I, the undersigned parent/guardian, hereby consent and authorize **LITI** Staff to administer medication as needed to the participant as indicated by me earlier in this application. I understand that the **LITI** Leadership Conference occurs in a secluded and hereby authorize trained **LITI** Staff to administer first aid to the participant when necessary.

In the event of a medical emergency, I understand that I will be contacted as soon as possible and that my child may be transported to the nearest hospital. I give permission for the administration of all needed medicines, performance of all surgical treatment, and the administration of any anesthetic or injection which, in the opinion of the attending physician, may be necessary and advisable in the event of any medical emergencies regarding my child. It is understood that efforts shall be made prior to rendering emergency treatment to the patient. In the event I am not available, I designate the individuals listed as "Emergency Contact" persons on page 2 of this application.

E. CONSENT FOR TRANSPORTATION

I give permission for **LITI** staff or volunteers to transport my child away from the **LITI** Leadership Conference for any reason that is deemed necessary. I understand that I am responsible for providing transportation to and from Camp Quinipet at the beginning and end of each **LITI** Conference, as well as in the event that my child must return home (including psychological or physical medical needs, rule infringement, or any other occurrence deemed necessary).

F. CONSENT FOR PHOTOGRAPHS AND VIDEO

I give permission for photographs/video footage to be taken of the participant, and for photographs/video footage in which the participant is included to be used by HUGS, Inc. for **LITI**, for publicity purposes, including newspaper articles, publications, websites, social media, and other publicity materials.

G. RELEASE, WAIVER, AND INDEMNIFICATION

I, the undersigned parent/guardian, do hereby execute this release, waiver, and indemnification and agree to represent as follows:

The release of Camp Quinipet, Human Understanding & Growth Services, Inc. (HUGS, Inc.), and the Long Island Teen Institute and their officers, employees, volunteers, and agents from any and all liability, loss, damage, costs, claims or causes of action including, but not limited to, all bodily injuries and property damages arising out of the sole negligence of Camp Quinipet, the Human Understanding & Growth Services, Inc. (HUGS, Inc.), and the Long Island Teen Institute.

*I further agree to indemnify and hold harmless the said above from any and all liability, loss, damage costs, or causes of action, including attorney's fees and witness costs, arising out of the undersigned participation in the Long Island Teen Institute (**LITI**) Leadership Conference, during transportation to or from a medical facility, and/or as a result of treatment administered to the above named participant while attending the Long Island Teen Institute.*

Parent/Guardian Signature:

Today's Date:

Parent/Guardian Name: (Please Print Clearly)