



SOROPTIMIST®  
Investing in Dreams

Dear Parent/Guardian,

We're excited your daughter is considering participating in Dream it, Be It: Career Support for Girls! Here are some things you should know:

The conference will take place from 9am to 3pm on **Saturday, February 1, 2020**, at **Central Willamette Credit Union Administrative Office, 7101 Supra Drive, Albany, across from Linn Benton Community College**. *There is no charge for this conference.*

Dream It, Be It is a program of Soroptimist International of the Americas/LiveYourDream.org.

The conference is hosted by Soroptimist International of Albany, part of an international organization of professional business people who volunteer right here in our community. You may know us from October's Walk for the Cause, our Spring Flower Sales fundraiser, the Community Service Student of the Year Scholarship, or our work with the F.A.C.T. office of Greater Albany Public Schools.

Designed specifically for girls in secondary school, Dream It, Be It provides participants with career support and guidance. This is more than just "what do I want to be when I grow up?" In this full-day event, your daughter will learn about career opportunities, setting and achieving goals, overcoming obstacles to success, and moving forward after setbacks. Your daughter will have the opportunity to work closely with volunteers who are professional and respected women in our community who work together on projects that benefit women and girls. Volunteers will collaborate with other community members to lead girls through activities that will help them develop skills relevant to whatever career they choose to pursue.

We know that your daughter probably has a lot of responsibilities at school and at home. We believe Dream It, Be It is a worthwhile investment in her future success. Our volunteers will also make every effort to keep your daughter safe. Our volunteers must meet legal requirements for working with children in our state and are prepared to give your daughter the best and safest experience possible.

We hope you'll consider giving your daughter permission to take part in Dream It, Be It. Please sign the attached forms and send to **Soroptimist International of Albany, PO Box 1475, Albany, OR 97321, or email to [siofalbany@gmail.com](mailto:siofalbany@gmail.com) before, or on the day of, the conference.** To register for the conference, **please return the attached application packet by January 8, 2020.** After the conference, we will be proctoring a Facebook discussion group through our Club site, SI Albany. If you do not wish your daughter to participate in this group, please indicate so on the media permission form.

If you have any questions or concerns, please contact me at the number below, or email to [siofalbany@gmail.com](mailto:siofalbany@gmail.com). We are excited for your daughter to join us!

Sincerely,

**Catherine Dorn**  
**Soroptimist International of Albany**  
**503-577-3602 (cell)**



Review the attached information packet, and complete and return the three-page application, reference and essay. **The application is due no later than January 8, 2020**, and may be sent by email or mail to the address at the bottom of this form.

PARTICIPANT INFORMATION

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

School \_\_\_\_\_ Grade in school \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Phone Number (contact number during the conference) \_\_\_\_\_

Parent/Guardian Email \_\_\_\_\_

Do you have any allergies or dietary restrictions that should be considered? Yes/No  
If yes, please explain below:

\_\_\_\_\_

Do you have any medical conditions we should be aware of that should be considered? Yes/No  
If yes, please explain below:

\_\_\_\_\_

Transportation from a central location in Albany may be available on the day of the conference. If it is offered, would you need transportation to the conference? Yes/No

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REFERENCE INFORMATION

Please provide the name and signature of one reference, who is not related to you, who would recommend you for our conference:

Name: \_\_\_\_\_ Signature \_\_\_\_\_

How do you know this student? \_\_\_\_\_

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RETURN BY JANUARY 8<sup>TH</sup> TO:

Soroptimist International of Albany | PO Box 1475 Albany, Oregon 97321 | [siofalbany@gmail.com](mailto:siofalbany@gmail.com)



ESSAY

1. What career type or career possibility interests you? Circle as many as you like, or write in the space

Career Type	Career Possibilities
Artistic	<ul style="list-style-type: none"> <li>• Journalist</li> <li>• Actress</li> <li>• Graphic Designer</li> <li>• Museum Curator</li> <li>• Attorney</li> <li>• Librarian</li> <li>• Architect</li> <li>• Advertising Executive</li> <li>• Writer/Editor</li> </ul>
Realistic	<ul style="list-style-type: none"> <li>• Mechanic</li> <li>• Carpenter</li> <li>• Police Officer</li> <li>• Engineer</li> <li>• Woodworker</li> </ul>
Enterprising	<ul style="list-style-type: none"> <li>• Real Estate Agent</li> <li>• Manager/CEO</li> <li>• Politician</li> <li>• Stock Broker</li> <li>• Sales Representative</li> <li>• Financial Planner</li> </ul>
Social	<ul style="list-style-type: none"> <li>• Counselor</li> <li>• Social Worker</li> <li>• Human Resources</li> <li>• Teacher</li> <li>• Nurse</li> <li>• Dietician</li> <li>• Trainer</li> </ul>
Conventional	<ul style="list-style-type: none"> <li>• Accountant</li> <li>• Book Keeper</li> <li>• Paralegal</li> <li>• Data Processor</li> <li>• Computer Operator</li> </ul>
Investigative	<ul style="list-style-type: none"> <li>• Physician</li> <li>• Computer Programmer</li> <li>• Psychologist</li> <li>• Software Engineer</li> <li>• Management Consultant</li> <li>• College Professor</li> </ul>

Write in your own:

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2. In the space provided, tell us about what you think it means to have a dream?

3. Is there anything else you would like us to know about you?

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By signing below, I agree that the information I have provided is as complete and accurate as possible.

Signature \_\_\_\_\_

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## Parental Consent and Release Form

A SOROPTIMIST/LIVEYOURDREAM.ORG RESOURCE

Dear Parent/Guardian,

Date: \_\_\_\_\_

Please sign and return the following form to **Catherine Dorn, Soroptimist International of Albany** at **siofalbany@gmail.com**.

I give permission for my daughter, \_\_\_\_\_, to attend and participate in the activities of Dream It, Be It: Career Support for Girls, a program of Soroptimist International of the Americas/LiveYourDream.org. I agree to the following, intending for me and my child to be legally bound:

1. In case of medical emergency, I grant the facilitators the right to authorize medical care, if I cannot be promptly and readily reached.
2. In the event medical treatment is necessary for my child, I agree to pay all costs associated with such treatment including the cost of emergency medical evaluation and care. I further agree to hold harmless and indemnify Soroptimist/LiveYourDream.org and its volunteers for any costs associated with medical treatment and transportation for my child.
3. I agree that Soroptimist/LiveYourDream.org is not responsible for any bodily injury, illness or disease, or loss or damage from any cause concerning this program, even in the event of negligence by the club, its members or facilitators. I release and agree to hold harmless Soroptimist/LiveYourDream.org members and facilitators from any liability in connection with the activities of this program.
4. This consent and release shall be governed by the law of the state in which Soroptimist/LiveYourDream.org (**Oregon**) is located, without regard to its principles on conflicts of laws.

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Parent/Guardian **Home** Phone: \_\_\_\_\_

Parent/Guardian **Work** Phone: \_\_\_\_\_

Parent/Guardian **Cell** Phone: \_\_\_\_\_



# Media Consent Form

**A SOROPTIMIST/LIVEYOURDREAM.ORG RESOURCE**

Dream It, Be It: Career Support for Girls participants have great stories to share about this life-changing program! Girls often share what they learned, how it prepared them to pursue their career goals, and how it boosted their confidence. So many girls have had positive experiences! When promoting Dream It, Be It, Soroptimist & LiveYourDream.org use first-hand stories and testimonials to show the program’s impact, encourage volunteers to host projects in their communities, and to attract donors so that we can continue providing resources to support this program.

By signing this media consent form, you give Soroptimist & LiveYourDream.org permission to use the below-mentioned girl’s name, photo, likeness and/or voice for publicity purposes in various formats including, but not limited to, print media, social media, photographs, website, audiovisual, fundraising appeals, ads, etc. Soroptimist & LiveYourDream.org shall retain all rights to said materials.

Name (print)

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*If above person is under 18 years of age:*

Parent/Gaurdian Name (print)

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Signature

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Address

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City, State Zip

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Phone

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E-mail

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Date

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Witness Name (print)

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Signature

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Date

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I do NOT wish my daughter to participate in the Facebook discussion on the SI Albany Facebook page after the conference





SOROPTIMIST®  
Investing in Dreams



*An international volunteer organization working to  
improve the lives of women and girls, in local  
communities and throughout the world.*

SOROPTIMIST INTERNATIONAL OF ALBANY

## Dream It Be It One Day Conference

Albany, Oregon

February 1, 2020

9 am – 4 pm

DRAFT Agenda

Registration/Snacks

Welcome

Session 1

Session 2

Session 3/ Luncheon

Session 4

Session 5

Wrap-Up and Dismissal