

Deaf and Hearing Siblings: Our Life Journey Together!

July 7-10, 2011

California School for the Deaf
39350 Gallaudet Dr.
Fremont, California 94538

A Retreat for:

ADULT Deaf, Hearing, and Coda Siblings
PARENTS with Deaf or mixed Deaf and Hearing Children
Professionals in Deaf Related Fields

Professional, Educational and Personal Growth
RID CEU 1.9 units (\$20 separate fee)



Thursday, 7/7, 7 p.m. to Sunday, 7/10, 12 pm

Presenters, Panel Participants include:

Rosa Lee, Deaf Performer, Editor, Kiss-Fist
Frank Gallimore, Hearing Brother of Rosa
Lisa and Sheila Jacobs, Deaf and Coda Siblings
Ethan Bernstein, Deaf, CSD Dean of Students
Suzette Schuster, Hearing sister of Ethan
David and Jane Fair, Deaf Parents
Others...

OPEN TO COMMUNITY
Saturday, July 9th, 7 p.m.
Performance by ROSA LEE

SPECIAL OFFER:

Pre-Register by June 20th

Registration: \$50

Saturday Night Performance: \$15

Special Combo Package:

\$195.00 first sibling

\$100 second sibling

\$100.00 food (3 breakfasts, 2 lunches, 2 dinners, and snacks)

\$75.00 Lodging (3 nights, CSD cottage)

\$50.00 Conference registration fee

\$15.00 Rosa Lee Performance, Saturday 7 pm

\$10.00 DJ/dance, Saturday 8-11 pm

Registration at: www.doublepride.com

FaceBook: deafhearingsibs: Our Life Journey Together
For more information: Sheila Jacobs or David Fair at: deafhearingsibs@gmail.com

“Deaf and Hearing Siblings: Our Life Journey Together!”

A Retreat for Deaf, Hearing, and Coda Siblings and Parents at CSD Fremont!

July 7-10, 2011

Siblings, have you wanted to share your family experiences with your Deaf or Hearing sibling? Well now you can! Join us for a Retreat for Deaf and Hearing siblings from families of Deaf and Hearing parents. This will be a great opportunity to explore and celebrate our unique sibling bonds in our varied families. Deaf and Hearing siblings with either Deaf or Hearing parents have a unique experience straddling both the Hearing and Deaf worlds. Deaf or Hearing parents have unique challenges as they navigate two cultures and languages under the same roof. The sibling relationship is a powerful peer influence in childhood as well as adulthood. Often Deaf and Hearing siblings attend different schools, have different friends, communities as well as differing relationships with family and extended family members. This can create richness as well as tension in the sibling relationship. This Retreat will explore this sibling experience in order to gain deeper understanding and wisdom to pass onto the Deaf and Hearing communities. This workshop will be presented by Deaf and Hearing siblings in ASL (interpreters provided) and will include large and small group discussions.

Retreat Goals:

1. To provide an opportunity to share and discuss our sibling experiences in order to honor our family relationships and our lives in both the Hearing and Deaf communities.
2. To explore our adult roles as Deaf parents and Hearing parents as well as our roles as grandparents, aunts, uncles, nieces and nephews.
3. To explore how parents navigated the cultural and communication challenges in their family, and what tips and tools they can pass on to other families with Deaf and Hearing siblings.
4. To consider how to share our experiences with future generations of Deaf and Hearing Siblings growing up with Deaf and Hearing parents.

This workshop is open to: Adults age 18 and up

**Coda and Deaf Siblings,
Hearing and Deaf Siblings of Deaf Parents,
Hearing and Deaf Siblings of Hearing Parents,
Deaf Parents with Deaf children or mixed Deaf and Hearing children,
Hearing Parents with Deaf children or mixed Deaf and Hearing children,
Deaf Siblings of Deaf Parents, and
Deaf Siblings of Hearing Parents.**

Sibling not available, COME YOURSELF!

While the Focus will be on Sibling Relationships, we strongly encourage Professionals in the Field to join for this educational, professional and personal opportunity for growth. RID Ceus are offered... 1.9 units (separate fee of \$20. Check payable to “Ohlone College IPP Activity Fund”)

Topics to Discuss:

Enlightenment of Identity as a Deaf or Hearing sibling – our discovery of being different in both Deaf and Hearing worlds.
Crossroads of Deaf and Hearing Teenage Siblings – our crossroads of being teenagers and living different in both Deaf and Hearing worlds.
Paths of Deaf and Hearing Adult Siblings – our paths
Present Life Journey of Deaf and Hearing Siblings – what we can do now

REGISTRATION FORM

July 7-10, 2011

Deaf and Hearing Siblings: Our Life Journey Together!

Please fill out each form for each person attending the retreat.

SECTION 1: PERSONAL INFORMATION

Name: _____

Address: _____

City/State/Zip: _____

Phone/Day: (_____) _____ Voice TTY VP

Phone/Evening: (_____) _____ Voice TTY VP

Email Address: _____

Who Are You? Female Male Age? 18-25 26-49 50 and up

Hearing Status: Deaf Hard of Hearing Hearing/Coda Hearing/Sibling

Parent Educational/Professional Interpreter Counselor

Other Deaf related field _____

SECTION 2: ACCOMMODATIONS

Cottage On-Campus Housing:

\$25/night per person (double occupancy), from Thursday, July 7, 2011, 7 p.m. to Sunday, July 10, 2011, 12 p.m.

Arrival date: _____ Departure date: _____ Total Nights: _____

I want to share my room with (name) _____

I will need a roommate: Female Male

SECTION 3: MEAL REQUEST

I am requesting vegetarian meals :

SECTION 4: INTERPRETING NEEDS

This retreat will be facilitated in ASL. Please let us know if you will need an interpreter:

I will need: Voice Interpreter Deaf/Blind Interpreter Other: _____

SECTION 5: EMERGENCY CONTACT INFORMATION

Emergency Contact Name: _____

Phone/Day: (_____) _____ Voice TTY VP

Phone/Evening: (_____) _____ Voice TTY VP

Pager/Email: _____

Medical Waiver:

I, _____, will be responsible for my medical coverage while I am at the Deaf and Hearing Siblings retreat. I understand that the California School for the Deaf and Retreat will not be liable and will not cover any medical expenses for any occurrence at CSD and/or Retreat.

Signature: _____ Date: _____

SECTION 6: MEDIA RELEASE

I, (print name) _____, give my consent for photos and/or media images of me to be used for our retreat’s publications used to advertise future programs. Initials: _____

SECTION 7: PAYMENT (Full payment must accompany this form)

Registration fee: (\$50.00) \$ _____

Meals: \$100 for 3 breakfasts, 2 lunches, 2 dinners, and snacks/beverages: \$ _____

Cottage Housing: (enter amount from Section 2: Accommodation, \$25 per night) (a total of \$75 for 3 nights) \$ _____

Dance and Show Tickets (Evening Entertainment): \$25.00 \$ _____

Total \$ _____

OR

Early Bird Combo Package: \$195 before June 20th \$ _____

Special Offer: First Sibling, \$195 \$ _____

Second Sibling, \$100 \$ _____

After June 21st: Combo Package \$225 \$ _____

Registration and Meals ONLY: \$150

SECTION 8: PAYMENT INFORMATION

Type of Payment: 1. Print and mail: _____ Check # _____
_____ Money Order # _____

2. Online registration and PayPal

RID (1.9) Ceus... make check payable to: “Ohlone College IPP Activity Fund”

Make check or money order payable to **Double Pride** and mail it with this completed form to: Double Pride, Attn: Deaf/Hearing Sibs Retreat, 2450 Peralta Blvd. #212, Fremont, California 94536.

Please contact Sheila Jacobs or David Fair at deafhearingsibs@gmail.com if you have any question about registration or if you want to donate money for the Retreat.

Visit our FaceBook page: ‘Deaf and Hearing Siblings: Our Life Journey Together’;
For updates, registration forms, see: www.doublepride.com.

Deaf and Hearing Siblings Committee: Co-Chairs: Sheila Jacobs, David Fair, Brenda Lyons.
Other committee members: Sandra Amundsen, April Brown, Calton, David, and Jane Fair, Lisa and Sheila Jacobs, Brenda Lyons, Laura Peterson, David Reynolds, Millie Stansfield, and Darrell Utley.

Registration Deadline:

June 20, 2011 – Applications will continue to be accepted after this date as long as space is available. Participants will receive a confirmation letter upon receipt until 6/30/11.

Refund Policy

Requests for refunds must be submitted in email to deafhearingsibs@gmail.com and will be issued as follows: Before the registration deadline 6/20/11: full refund of registration. Between 6/21/11 and 6/29/11. 50% registration fee refunded minus a \$50 administrative fee. After 6/30/11: no refund. No refunds will be processed without written request except when we have cancelled the retreat.