



## 21st Century Leadership REGISTRATION INFORMATION

Please print this form, fill in the information below, and either fax the form to 486-3041 or mail to us at: 8503-145 street, Edmonton, AB. T5R 0T3.

Your Full Name: \_\_\_\_\_

Name you would like to be called: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

Zip/Postal code: \_\_\_\_\_

Home Phone (include area code): \_\_\_\_\_

Work Phone (include area code): \_\_\_\_\_

FAX #(include area code): \_\_\_\_\_

Cell Phone # (include area code): \_\_\_\_\_

E-mail address: \_\_\_\_\_

Date of Birth (Day/Month/Year): \_\_\_\_\_

Male(  ) Female(  )

Marital Status: \_\_\_\_\_

Age(s) of Children: \_\_\_\_\_

Occupation: \_\_\_\_\_

Position: \_\_\_\_\_

Employer: \_\_\_\_\_

Last year of formal education completed (mark one):

6(  ) 7(  ) 8(  ) 9(  ) 10(  ) 11(  ) 12(  ) 13(  ) 14(  ) 15(  ) 16(  ) 17(  ) 18(  ) 19(  ) 20(  ) 21+(  )

1. What is your purpose for attending 21st Century Leadership?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Who is the person (other than yourself) who most influenced your decision?

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**HEALTH INFORMATION**

To ensure that the staff may more effectively accommodate your needs while you are in this program, the following information is requested: (This information will be kept confidential and is for staff use only.)

1. Do you have any learning, physical, or emotional impairments which may require special accommodations while in this program? (place an x beside the appropriate answer) Yes ( ) No ( )

2. Is there anything else about your physical condition such as epilepsy, asthma, diabetes, or heart problems, that could be a problem for you while you are in this program? (place an x beside the appropriate answer) Yes ( ) No ( )

3. Do you have special dietary needs or food allergies? Are you a vegetarian? (place an x beside the appropriate answer) Yes ( ) No ( )

4. If you answered "yes" to 1, 2 or 3, are you currently taking prescribed medication for the condition? Yes ( ) No ( )

5. Are you currently in therapy or counseling? Exclude Vocational Counseling. (place an x beside the appropriate answer) Yes ( ) No ( )

If so, we request that you discuss taking this class with your therapist to integrate it with your treatment plan.

6. Are you currently taking prescribed medication for an emotional or psychological condition such as depression, anxiety or more serious conditions? (place an x beside the appropriate answer) Yes ( ) No ( )

7. Have you been hospitalized for psychiatric reasons within the past year? (place an x beside the appropriate answer) Yes ( ) No ( )

**IMPORTANT:** If you have answered "YES" to one or more of the above questions and the course starts within three weeks, please call your 21st Century Leadership Representative immediately so we can complete your registration process and accommodate your needs. Describe your condition, medication, and/or special needs below:

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**Please carefully consider the following:**

If you have a physical condition which requires special treatment throughout the day, please do not attend this program until your health has stabilized and your Health Professional agrees that attending would be beneficial for you.

If you are considering taking this seminar because you are having very serious emotional problems or are having severe difficulty coping with your life, it would be more appropriate for you to seek the assistance of a professional who is trained to deal with such problems than for you to attend this seminar at this time.

If you are currently in treatment for psychological problems, please do not attend this seminar unless you and your Health Professional agree that your emotional health is stable and that attending would be beneficial for you.

The person to be contacted in the event of an emergency is:

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

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**QUESTIONNAIRE**

Complete the following with the first responses that come to mind. If second or third responses come up, add them also.

1. For me, the essence of leadership is: \_\_\_\_\_

\_\_\_\_\_

2. My greatest strength as a leader is: \_\_\_\_\_

\_\_\_\_\_

3. My greatest weakness as a leader is: \_\_\_\_\_

\_\_\_\_\_

4. The aspect of leadership I would most like to develop is: \_\_\_\_\_

\_\_\_\_\_

5. The people in my life with whom I play a leadership role are (categories, rather than names): \_\_\_\_\_

\_\_\_\_\_

6. The historical leader I most admire is: \_\_\_\_\_

\_\_\_\_\_

7. The attractive traits of my most-admired leader are: \_\_\_\_\_

\_\_\_\_\_

8. As a leader, my most outstanding accomplishment to date is: \_\_\_\_\_

\_\_\_\_\_

9. As a leader, my greatest failure to date is: \_\_\_\_\_

\_\_\_\_\_

10. The aspect of leadership I like the least is: \_\_\_\_\_

\_\_\_\_\_

11. The area of my life that works least well is: \_\_\_\_\_

\_\_\_\_\_

12. My strongest belief about life is: \_\_\_\_\_

\_\_\_\_\_

13. I see that my purpose in life is: \_\_\_\_\_

\_\_\_\_\_

14. One question about leadership I would earnestly like answered is: \_\_\_\_\_

\_\_\_\_\_

15. One question about myself I would earnestly like answered is: \_\_\_\_\_

\_\_\_\_\_

16. Rate yourself from one to ten on the following topics, with one being the lowest:

( ) knowledge of my strengths

( ) knowledge of my limits

( ) my tendency to handle things myself

( ) my level of internal permission to allow myself to be supported by others

( ) my effectiveness as a "follower"

( ) my desire to lead

( ) my understanding of the meaning of life

( ) my role in this meaning of life

## **COURSE DETAILS YOU NEED TO KNOW**

### **TRANSPORTATION, LODGING & MEALS**

21st Century Leadership will be held at Dumas Bay Centre in Federal Way, Washington. Dumas Bay Centre is less than 25 miles south of Sea-Tac airport. Shuttle Express will transport you to Dumas Bay Centre from the airport. \$23 for the first person, \$6 for the second, in the same van. After retrieving your luggage, follow the signs for ground transportation. Once in the parking garage, proceed to the Shuttle Express booth by following the ground transportation check-in signs to the center of the ground transportation area.

**Driving Directions:** From the North or South off I-5, take Exit 143. Go West on 320th St. toward The Commons Mall. Stay on 320th until it ends at a three-way stop. Take a right onto 47th Avenue and stay on 47th until it ends. Take a right at first stop sign onto Dash Point Road (WA State 509). The Dumas Bay Centre is one mile on the left side of the street.

**3200 SW Dash Point Road, Federal Way, WA 98023, (253) 835-2000.**

Check-in for the course will begin at 5:00 PM on Monday. The course will begin promptly at 6:00 PM. The course ends by 4:00 PM Sunday.

Lodging is provided. Sleeping arrangements are semiprivate. Let your Representative know if you will be arriving at the site earlier than 3:00 PM.

There is no evening meal provided Monday, so be sure to eat before arriving at the site. Please do not drink alcoholic beverages after you begin your journey to the 21st Century Leadership site. Smoking is permitted but restricted at 21st Century Leadership.

### **PIECE OF MUSIC**

Bring with you a CD with the song that most inspires you to leadership. The song may be instrumental, or vocal. In the interest of sound quality, please do not bring your music on a cassette tape.

### **ATTIRE**

Attire at 21st Century Leadership is business casual.

### **WHAT TO BRING**

Along with your regular travel gear, you may want to bring the following items:

Flashlight

Shower slippers

Comfortable outfit and shoes for jogging/walking

Earplugs

And be sure to bring...

Three-ring binder with paper

Favorite writing paper & envelopes

## CONFIRMATION DATE & PAYMENT POLICY

To reserve a seat in 21st Century Leadership, a non-refundable deposit of a minimum of \$1,000.00 US (\$1,500 CD) and a completed 21st Century Leadership Registration Form is required. The balance of your tuition is due on or before the course confirmation date, which is six (6) weeks prior to the date the course you select begins.

If you are registering within (6) weeks of the beginning of the course date you selected, your tuition is due in full upon registration.

If you decide to not attend on the date for which you are registered and notify us prior to the program confirmation date, your full tuition will be transferred to a course date of your choice that is within one year from the date you registered with a deposit.

If you decide to not attend on the date for which you are registered and notify us after the program confirmation date, your tuition will be transferred to a course date of your choice that is within one year from the date you registered with a deposit. To reserve a seat for this new date, a new registration fee of \$1,000 US (\$1,500 CD) is required.

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