

Traditional Medicine Workshop Registration Package



January 23-24 – Session A or 26-27, 2017 – Session B @
(Sessions are exactly the same – to allow for more community members to attend)
Treaty 8 Tribal Association (10233 100th Avenue, FSJ)

Objective:

To provide an opportunity for First Nation community members of NE BC to gather in unity and learn the importance of preservation, application, administration and harvesting of traditional medicines found in various plants and roots.

Who should Attend:

- ◆ Community Members / Elder's / Youth (over 18) / Adults (25-55)
 - ◆ Community Health Officials / Health Managers / Health Directors
 - ◆ All attendees must obtain support from their Health Director
- *6 Seats per FN community, please connect with your Health Director for more details*

Overall Goal:

The goal of the Traditional Medicine Workshop is to:

- ◆ Build healthy communities and individuals;
- ◆ Create a safe place to awaken your inner spirits;
- ◆ Learn to identify, harvest and preserve medicinal plants;
- ◆ Provide an opportunity for NE FN communities to gather in unity;
- ◆ Raise awareness of traditional approaches to holistic health options;
- ◆ Strengthen knowledge of traditional medicinal treatments;
- ◆ Teach concepts and techniques to harvesting plants and medicines;
- ◆ To celebrate community spirit and friendship; and
- ◆ To participate and/or support in a healing circle.

Current Agenda (subject to change without notice, actual agenda available at event):

- ◆ **Session A, Monday, January 23 to Tuesday, January 24, 2017**
- ◆ **Session B, Thursday, January 26 to Friday, January 27, 2017**
 - ◆ Registration @8:30am/Continental Breakfast @9:00am/Prayer @9:15am
 - ◆ Traditional Belief – Harmonious Living
 - ◆ Standing Medicine People
 - ◆ Understanding Grief
 - ◆ Blessings
 - ◆ Clearing Away Healing Hindrances
 - ◆ Combing of the Hair – A woman's Healing Circle
 - ◆ Health Snacks / Lunches
 - ◆ *Can only attend either Session A or Session B*

Traditional Medicine Workshop

January 23-24 or January 26-27, 2017

Official Registration Form



Name (as it should appear on your nametag): _____

Status: ☐ FN Community Member ☐ FN Health Director ☐ Other

Group / Organization: _____

Email: _____

Phone: _____ Fax: _____ Cell: _____

Allergies/Food Restrictions: _____

NO WORKSHOP FEES to delegates
Registration deadline Wednesday, January 18, 2017

Check off the session that you will be attending (40 seats per session only):
Session A ☐ (January 23-24) **Session B** ☐ (January 26-27)

Subsidy Details:

Treaty 8 will provide funding to each of the eight (8) FN communities in the NE. The funds are based on a maximum of two vehicles from each community, a maximum of six hotel rooms per community, \$25 per night supper subsidy for each member to attend the Workshop. A travel form will be provided to the health leads for completion. All forms are to be completed and submitted to Marlene Greyeyes at the Treaty 8. If they are provided by January 16, 2017 cheque will be available at the workshop. All forms received after that date, will receive payment a week after the event. All registration forms must be signed and approved by your local Health Director. All payments will be made based on Treaty 8's current travel rates.

Travel Subsidy:

Kilometers will be reimbursed based on a maximum of two vehicles from each community, to and from your home community to attend the Workshop.

Will you be driving and expect km reimbursement?: ☐ yes ☐ no

Will you be the passenger in vehicle? ☐ yes ☐ no

To whom do we pay the travel subsidy to?: ☐ Attendee ☐ The FN Community

Hotel Accommodations:

A block of hotel rooms are reserved for workshop delegates and each community can use up to six hotel rooms for their members. All hotel rooms will be booked by the Project Coordinator.

Do you need a hotel?: ☐ yes ☐ no Are you willing to share a hotel room?: ☐ yes ☐ no

Meal (Supper's only) Subsidy:

The supper subsidies are based on \$25 per night that you are away from your home community.

Is your Health Director aware of your interest and support you attending? ☐ yes ☐ no

Complete this form and send it to / or for more information contact:

Project Coordinator: (P) 250.793.0272 (F) 250.785.8808 (E) jocelyn@bizzlybody.ca (w) www.bizzlybody.ca
