# 2025 WECIJ U'UWI HEMAPAI

Young Women's Gathering

Funded by the San Xavier District of the Tohono O'odham Nation

Sunday, May 25—Wednesday, May 28, 2025
San Xavier District Hikdan Park



Empowering young O'odham women by reconnecting to their O'odham identity, with vision and guidance to stand strong in their strength, self love, and self respect.



Young O'odham Women ages 10-17 years (age limit enforced) are invited to participate in an outdoor event of spiritual, physical, social, and educational activities presented by local O'odham women leaders and elders. Participants will camp throughout the event. Meals will be provided and may be prepared by participants.

What to look forward to:

Daily Sunrise Runs ~ Doll Making ~ Pottery ~ Traditional Songs ~ Traditional Women Games ~ Wellness Work shops ~ Teachings on Womanhood ~ Hands-on Workshops ~ Sea Shell Etching ~ Cooking & MORE!

# Registration

- -Free gathering for Oʻodham Young Women.
- -Limited to the first 100 applicants.
- -Pre-Registration deadline—Wednesday, May 14, 2025.
- -Registration forms are available at the SXD Office & SXD Education Center.



Submit paper applications to: ywg@waknet.org.

For more information call:

Danielle Stephens at 520.573-4000

Wecij U uwi Hemapai 6th Annual Young Women's Gathering All participants are expected to behave in a respectful and responsible manner.

**Prohibited**: Absolutely NO Drugs, Alcohol, Gang Attire & Weapons allowed!

#### Electronic FREE (Please Leave Your Devices @ Home):

Cell Phones, Ipods, Ipads, laptops, tablet, MP3, any type of stereo systems, and more! An emergency phone will be provided as needed.

-All chaperones/parents/volunteers participating in the event, MUST attend a MANDATORY meeting/training on <u>Wednesday, May 14th @ 6pm</u> at the San Xavier District Education Center. A hybrid meeting will be offered for those who cannot attend the mandatory meeting inperson.

WOMEN VOLUNTEERS NEEDED FOR THE DURATION OF THE EVENT!

Donations accepted and appreciated! ~Contact SXD 520-573-4000~

## Wecij U'uwi Hemapai 6<sup>th</sup> Annual Young Women's Gathering

A Gathering of Young O'odham Women Sunday, May 25 – Wednesday, May 28, 2025 Application Deadline: Wednesday, May 14, 2025

#### **Participant Registration Form**

Ages 10 to 17 Years old (Age limits will be enforced)

Participant's Name	Age	DOB		Community ct		
Parent/Guardian's Name:	Email:					
Street Address:	City:		State:	Zip:		
Cell Phone & Work #:	M	Mailing Address:				
Participant's Shirt Size (Please	e circle your size):					
<ul> <li>Adult S</li> <li>Adult M</li> <li>Adult L</li> <li>Adult XL</li> <li>Adult XXL</li> <li>Other</li> </ul> Emergency Contact #1 (if pare)						
Name:	Relationship to individua	Relationship to individual:				
Street Address:	City:		State:	Zip:		
Emergency Contact #2 (if pare	ent cannot be reached):					
Name:	Relationship to individua	Relationship to individual:				
Street Address:	City:		State:	Zip:		

Notification: A <u>lice screening</u> will be conducted for ALL participants at the time of registration/check-in. To be considerate of all participants and prevent an outbreak, participants must be clear of head lice.

<u>IMPORTANT:</u> Participants requiring daily medication must check in the medication with the Young Women's Gathering staff for safekeeping. The medication will be administered only according to prescription. The medication must have the participant's name and prescribed dosage on the label; otherwise, the parent will have to come administer the dosage.

Medical History:				
Known allergies (please specify):				
Does the participant require an EpiPen?Yes No	)			
List chronic diseases and illnesses (asthma, diabetes, etc.)	:			
Please tell us about your child (describe any physical need	ls, special i	needs, emoti	onal or beha	vioral concerns):
Should your child be excluded or restricted from physical physical or competitive activities:	or competi	itive activitie	es? If so, ple	ease explain restrictive
Indicate medications taken daily. Will the participant have	e medicatio	on(s) with he	er?Yes	(list below) No
Please indicate if medication is prescription (Rx) or Over Name of Medication:  Name of Medication:  Name of Medication:  Name of Medication:	Rx: □ Rx: □ Rx: □	OTC: □ OTC: □ OTC: □	Time(s):	
Health Insurance Information:	_ KX. 🗀	отс. <u></u>	- I IIII•(s).	
Health Care Insurance Provider:			Group #:	
Address: City: _				
Emergency Care Facility: (other than IHS after 5 p.m.):				
Medical Authorization:  I grant permission for my child	fety and care	re of my dau e. If I cannot	ghter and event be contacted	ery effort will be made to d, medical treatment may be
Waiver and Release:  I	ployees of hatsoever ployees of	r 2025 Your arising from r volunteers	ng Women's m the partic	ipation of this event. In
Photographic Release:  I	its consen e San Xav	graphic ima t, during my vier District	ges and vide y participati including,	ion with the San Xavier but not limited to any
Parent/Legal Guardian Signature			Dat	te
Printed Name			- Pho	one Number

## **IMPORTANT INFORMATION:** PARENTAL/GUARDIAN APPROVAL REQUESTED

(Please circle one)

Puberty and Physical Change: Will be discussing/displaying information regarding the physical changes that occur for females, including reproduction. Participants will be separated by age groups.

**Healthy Relationships:** Will be discussing/displaying information on relationships, reproduction, sexual harassment, domestic violence, motherhood & healthy families. No

\*PLEASE READ: Wednesday, May 28, 2025, is the Closing Ceremony between the hours of 5:00 p.m. -7:00 p.m. Families are asked to be present to witness and hear the participants express themselves regarding their experience. It is important that at least one family member attends the Closing Ceremony. A meal will be provided. We would like all participants, their parents/guardians, and families to please work this into your time schedule. The timeframe is estimated, if you cannot be there for the closing, please, allow time for the young women to participate, stay and eat. For food planning purposes, please indicate how many family members will be attending the closing ceremony .

We are in need of positive role models who can volunteer for the duration of the camp. If you are interested in volunteering, please attend the mandatory Parent Orientation on Wednesday, May 14, 2025, at 6:00 p.m. in the San Xavier District Office Council Chambers located at 2018 W. San Xavier Rd., Tucson, AZ 85746. A hybrid meeting will be held for those who cannot attend the mandatory meeting in person. Volunteer applications will be available at the meeting for you to fill out.

Return the completed registration form by mailing to:

San Xavier District Office 2018 W. San Xavier Road **Tucson, AZ 85746** 

Or by email at <a href="www.www.www.org">www.www.org</a>

Contact: Danielle Stephens @ 520-573-4000

Fax: 520-573-4089

Email: dstephens@waknet.org

#### **YWG General Rules and Safety**

- 1. Participants will be exposed to the natural elements (insects, cactus, rough terrain, etc.), heights, sharp objects, animals, physical activities, and extreme temperatures. Everyone needs to practice safety and come prepared for the outdoors. For example, please have your child start hydrating at least 1 week before the event.
- 2. Participants who require medication daily will identify it on their registration form and check it in with the Young Women's Gathering staff. It will be the primary responsibility of the participant to adhere to their medication routine.
- 3. All participants who need medical attention for accidents or injuries will be tended to immediately and the Young Women's Gathering staff will be notified. Extreme medical emergencies will be handled by trained EMT's.
- 4. All participants will have emergency contact information including names and numbers, medical conditions, insurance information, treatment release and waiver on file with their registration form signed by the parent or guardian.
- 5. The following is a list of acceptable and expected behaviors of youth participating in the program:
  - Language: Participants will use appropriate and respectful language in communicating with each other, staff and volunteers.
  - Property: Participants will handle property with care and return all items borrowed to their proper owner.
  - Disagreements: Any issue will be discussed and settled in a respectful manner using restorative practice.
  - Disorderly Conduct: Fighting, wrestling, horse play, rough house or any other disorderly conduct will not be tolerated on District property.
  - Participants will not engage in, threaten, or harm others in any way. Physical abuse, bullying, name calling, taunting or intimidation will not be allowed.
  - Clothing: Participants will wear proper and appropriate clothing attire.
  - Drugs, alcohol, vapes or possession of a weapon are not permitted.
- 6. Every effort will be made to encourage participants to stay for the duration of the event. Individuals who pose a threat may be asked to leave. Parent/Guardians will be contacted; or if the need arises, Tohono O'odham Police will be contacted.
- 7. Parents, please provide notification to the Young Women's Gathering staff if you plan on picking up your child for any reason. Participants are highly encouraged to stay during the entire event. Call 520-573-4000 if needed.
- 8. Belongings will be searched upon arrival.
- 9. Please call the group leaders if you would like to check in or visit with your child.
- 10. No outside food or snacks.

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Hemapai 6 <sup>th</sup> Annual Young Women's	, understand and agree to the rules and guidelines of the Wecij U'uwi Gathering event. I understand that if I fail to follow these guidelines, I may
•	ate in the full duration of the event. Parents/Guardians will be contacted or if the
Participant Signature:	Date:
Parent/Guardian Signature:	Date:

# CHECK LIST OF ITEMS TO BRING FOR YOUNG WOMEN'S GATHERING

In an effort to take care of our environment and cut down on waste we are asking each participant to bring their own eating utensils and cups for use throughout the gathering.

Please keep in mind that the young women will be camping outdoors and will need all the appropriate camping equipment and casual clothing for outdoor activities, running and hiking. <u>PLEASE LABEL / WRITE YOUR NAME ON ALL PERSONAL ITEMS</u>.

Please be advised that the participants will be camping in an assigned area with their age group and leaders. Siblings and relatives may be asked to camp in other areas near their group leader.

1	Water Bottle or Cup with lid (20 oz. or less)
2	Spoon & Fork
3	Bowl for stew, soup or cereal
	Plate for meals
5	Soap (body wash)
6	Wipes
	Hand Sanitizer
	Shampoo
9	Deodorant
10	Toothbrush
	Toothpaste
12	Comb/Brush
13	Bath Towel
14	3-4 Changes of comfortable casual clothes
15	Sweater
16	Pair of pants/sweats
17	Running Shorts
18	Running shoes/Hiking Shoes
19	Flashlight/Batteries (please bring)
20	Sleeping Bag & Blankets for warmth.
21	Tarp (lay sleeping bag on top of tarp so sleeping bag won't get wet)
22	Medications (if needed). Make sure you check this in at Registration
23	Sunscreen
24	Mosquito Repellent
25	Camping Tent
	Camping Chair
27	Umbrella (Optional)
28	Feminine Hygiene Products (will be available)