



LEARN TO SOAR

WHAT:

- + Carla McGhee, former WNBA great, Olympic gold medalist and two-time NCAA Champion, will kick off the workshop with her inspiring story of overcoming a near fatal car crash to become a legendary basketball player
- + Girls will watch segments of the stirring basketball documentary, *The Heart of the Game*, and will be led through a highly-regarded curriculum built around the themes of teamwork, character, and conflict resolution. They will learn strategies like taking time to calm down, taking turns to explain each person's side, asking for clarification, brainstorming, and patience to overcome conflict
- + Carla's life experiences demonstrate the success of these strategies and importance of building a strong character while relying on support from a positive inner circle

WHY:

To demonstrate the importance of building a strong character, maintaining a positive self-image and learning skills for conflict resolution.

WHEN:

Friday, June 12, 2009

- 3:30 – 6:00pm: Workshop
- 6:00 – 6:30pm: Trolley pick-up to UIC Pavilion
- 6:30 – 7:30pm: Meal/watch pre-game warm-ups
- 7:30 – 10:00pm: Sky v. Atlanta Dream game
- 10:00pm: Parent pick up

WHERE:

Drop Off:

UIC Forum

725 W. Roosevelt Road (corner of Roosevelt & Halsted), Chicago

Pick Up:

UIC Pavilion

525 S. Racine (corners of Racine & Harrison), Chicago

ORGANIZERS:

Chicago Sky, Chicago Sky Cares Foundation

PERFORMER GENERAL RELEASE FORM

For good and valuable consideration, receipt of which is hereby acknowledged, I hereby release and hold harmless the CHICAGO SKY, Chicago Sky Cares Foundation and their respective parents, subsidiaries, affiliates, directors, officers, governors, employees and agents from and against any and all claims, causes of action, or demands relating to or arising out of my participation in the Learn to Soar event.

I expressly assume all risk of injury (including permanent disability and death) arising out of my performance, howsoever caused or arising and accept personal responsibility for the damages following such injury, permanent disability or death.

I grant full permission to the CHICAGO SKY, Chicago Sky Cares Foundation, with no obligation to compensate me further, to use any photographs or videotapes of my participation.

I have full authority to execute this General Release and do so with full knowledge of the facts and circumstances surrounding my participation.

I acknowledge that I have read and fully understand the foregoing.

BY: _____
(Printed Name)

(Signature) Dated _____

(Parent's Signature) Dated _____

Name: _____ Birth Date (mm/dd/yyyy): ____/____/____

E-mail: _____ Phone #: _____ T-Shirt Size: _____

Address: _____ City: _____ State: _____ Zip: _____

Please return this to your group leader or fax it directly to 312.828.9979, attention Kristi Faulkner, to guarantee your space is reserved.

