**BELOVED COMMUNITY TOUR**

***Exploring Civil Rights Struggles, Past and Present, in the South***

**Saturday 6 July – Thursday 11 July 2019**

**GENERAL INFORMATION**

Thank you for considering the Beloved Community Tour, an adult enrichment offering of Extended Learning Programs at Carolina Friends School.

We have space for approximately 30 participants, aged 18 years and beyond. We seek a balance of travelers, including:

* educators (from CFS, other Quaker and independent, traditional public, and charter schools and colleges and universities)
* alumni; former staff; current and former parents, grandparents, and trustees; and friends in the CFS community
* members of the Chapel Hill, Durham, and other Friends meetings
* other interested adults

**Applications received first will get priority consideration, but final decisions may take into account other factors (most notably balance among the participant groups above).**

If you have questions about mobility demands or other tour particulars, please email Anthony at [ExtendedLearning@cfsnc.org](mailto:ExtendedLearning@cfsnc.org).

**REGISTRATION**

To register, please complete the attached form (one per person) and return along with a $500 deposit check payable to ***Carolina Friends School*** (write ***Beloved Community Tour*** in the memo area) via first class postal mail or hand delivered:

#### ...find learning, reflection, and inspiration in community.

Beloved Community Tour

Carolina Friends School

4809 Friends School Road

Durham, NC 27705

The deposit is refundable **only** if we’re able to fill your space, or if we don’t have a minimum number of participants. The $1,090 balance will be due by Wednesday 15 May. We're glad to work with you on possible alternative payment plans.

We’ll email each applicant to acknowledge receipt of the registration form and deposit and, as soon as possible, confirm participation status. We’ll create a wait list if we have more applicants than spaces.

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**BELOVED COMMUNITY TOUR—Registration Form**

**Registration forms (with $500 deposit) will be accepted in the Center Building.**

First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, State, Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check all that apply:

* I am applying to participate in the trip and have enclosed a $500 deposit payable to ***Carolina Friends School* (with *Beloved Community Tour* in the memo area)**, refundable only if my space is filled.
* I am affiliated with CFS, another school or educational institution, and/or a Friends meeting.

Please indicate affiliation(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* As a CFS staff member, a tour grant of $\_\_\_\_\_\_\_\_\_ would be necessary for me to participate. (Please share on the reverse or in an attachment any additional information that might help us understand your need and prioritize limited funds. Any staff member who checks the box for consideration and doesn’t receive a grant would be released from the non-refundability clause referenced above.)

1) Any dietary restrictions? (please be as specific as you can) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2) Any physical limitations that might impair your mobility? (please be as specific as you can) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3) Please list two Emergency Contacts (people in the United States):

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4) Do you have a preferred roommate? **Yes / No** If yes, name of roommate\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5) What is drawing you to participate in the Beloved Community Tour? Are there questions or aspects of civil rights issues (past and/or present) that particularly interest you in connection with this experience?

6) What else would you like us to know? (Please use the reverse or an attachment if necessary.)