2012 Student Leadership Conference

July 19-22, 2012
Stonehill College
North Easton, MA

Sponsored by the NFHS Section 1 State Associations
## Tentative Schedule of Events

### Thursday, July 19
- **Registration**
  - 1:00 pm - 3:00 pm
- **Opening General Session**
  - 4:00 pm - 6:30 pm
- **Dinner**
  - 6:30 pm - 7:30 pm
- **State Meetings**
  - 7:45 pm - 9:00 pm
- **Recreation Time**
  - 9:00 pm - 10:00 pm

### Friday, July 20
- **Breakfast**
  - 7:00 am - 8:15 am
- **General Session**
  - 8:30 am - 9:00 am
- **1st Breakout Session**
  - 9:15 am - 10:45 am
- **Elective Session #1**
  - 11:00 am - 12:00 pm
- **Lunch**
  - 12:15 pm - 1:00 pm
- **Elective Session #2**
  - 1:15 pm - 2:15 pm
- **2nd Breakout Session**
  - 2:30 pm - 4:00 pm
- **State Meetings**
  - 4:15 pm - 5:15 pm
- **Load Buses**
  - 5:30 pm - 5:45 pm
- **Special Group Event**
  - 6:30 pm - 10:00 pm

### Saturday, July 21
- **Breakfast**
  - 7:00 am - 8:15 am
- **General Session**
  - 8:30 am - 9:00 am
- **3rd Breakout Session**
  - 9:15 am - 10:45 am
- **State Meetings**
  - 11:00 am - 12:00 pm
- **Lunch**
  - 12:00 pm - 12:45 pm
- **Load Buses**
  - 12:30 pm - 12:45 pm
- **Community Service Projects**
  - 1:00 pm - 5:00 pm
- **Dinner**
  - 6:00 pm - 7:30 pm
- **Special Group Event/Recreation Time**
  - 7:00 pm - 10:00 pm

### Sunday, July 22
- **Breakfast**
  - 7:00 am - 8:15 am
- **State Action Plan Reports**
  - 9:00 am - 9:30 am
- **Closing General Session**
  - 9:30 am - 11:00 am
- **Checkout/Return Room Keys**
  - 11:00 am - 12:30 pm
Conference Overview

Tomorrow’s Leaders: High School Athletics and Activities Participants
Incredible attention is being paid to high school athletics and activities programs today. Participants in these programs are looked up to as leaders because of their position on the team or club. The impact that these young people have on the climate and culture of their schools, fellow students and community is incredible. In fact, studies show that more than one-half of high school students participate in some form of school activity or athletic program. The involvement of these students in the success of a high school is paramount and critical.

The New England state associations of the National Federation of State High School Associations (NFHS) want to be the leaders in training talented, committed young people to become better citizens who will be positive, contributing adults and role models for youth. We are pleased to announce that in partnership, the state associations from Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island and Vermont will be hosting the second annual New England Student Leadership Conference from July 19-22, 2012 at Stonehill College in Easton, MA. This conference is a four-day, residential event for over 300 student and adult leaders who participate in interscholastic athletic and activity programs through their state high school athletic/activities associations.

The conference is modeled after the NFHS National Student Leadership Conference that has taken place in Indianapolis, IN for the past decade. The NFHS event was the only national student leadership conference for high school athletes and activity participants. The goal of the NFHS event was to assist high school student-athletes and activity participants in developing their leadership abilities while interacting with peers from across the United States and Canada. This conference will replicate the training curriculum for student-athletes and activity participants from across New England.

Conference Curriculum
The curriculum for the conference will focus on Respect, Positive Values, Perspective, Sportsmanship, Teamwork, Healthy Lifestyles, Community Service and Self-Evaluation. These components will be presented in large and small-group sessions, led by outstanding adult and college facilitators specifically chosen for their involvement in athletics at the high school and collegiate level, and will address contemporary issues that impact a young person being a leader and role model. In addition to group discussion, special guest speakers will share inspirational messages, stories of overcoming adversity and utilizing the power of positive influence. Delegates will be able to choose from a menu of elective topic sessions including: bullying; drug and alcohol prevention; the role of the high school captain; the college admissions process; strength and conditioning; social networking responsibility; collegiate athletic recruiting; and wellness. The conference will also incorporate a community service project as part of the leadership training curriculum that will take place in local communities.

Supervision
In addition to the 30 college and adult curriculum facilitators, approximately 30 adult delegates will serve as advisors and chaperones as they oversee the student delegates from their respective states. These adults will take an active part in the discussions and curriculum of the conference. The adult delegates and adult staff members will be available to help the students with any questions or concerns they might have during the four-day event. A conference nurse will be on site throughout the week for any medical issues. In addition, Stonehill College Public Safety and staff will be available 24 hours a day on campus for any safety and security needs.

Attire
The conference takes place in a relaxed atmosphere to encourage learning and facilitate interaction. The high temperatures and humid weather during the mid-summer dictate casual clothing for this event. Jeans, shorts, sneakers and t-shirts are appropriate for the majority of the conference functions. Participants will be provided with two t-shirts during registration that are intended to be worn on specific days of the conference. There are two occasions when attire needs to be specific. The first event is a community service project when participants should wear clothing/footwear that they will not mind getting dirty. The second event is a celebration/dance on Saturday evening when
participants should wear casual clothes. Please do not bring any questionable or offensive attire. For further information, please see the recommended packing list on page 5.

**Housing**
Delegates will be housed in traditional college dormitories. Each room will accommodate 2-4 delegates. There will be bathrooms and showers on each floor or in each townhouse. Bed linens (sheets and blanket) and towels will be provided for each participant. However, participants are encouraged to bring their own pillow as this item will not be provided. Delegates are to sleep in rooms to which they have been assigned. Visiting a room assigned to the opposite sex is not permitted. Delegates must submit a separate check made payable to “Stonehill College” in the amount of $60 as a dorm key/card deposit. When the room key/card is returned at the end of the conference, the check will be returned to the delegate. In the event that a delegate loses a room key/card, the check will be deposited by Stonehill College. The sponsoring state associations and Stonehill College are not responsible for key/cards lost or misplaced for any reason.

**Meals**
Meals will be provided by the college food service in the college dining hall. All meals will be provided beginning with dinner on Thursday, July 19 and ending with breakfast on Sunday, July 22. Students who have food allergies or special dietary needs are asked to indicate such information on the Student Health History Form (page 8). Some dorms have vending machines that can be utilized for snacks during the week. A snack bar will also be available in the main conference registration area during regular conference hours. Students are encouraged to bring small amounts of money for vending machines and the snack bar in addition to their own snacks/bottled drinks if necessary.

**Code of Conduct/Conference Policies**
Student participants are expected to act in a responsible manner that will reflect well on themselves, their schools, their state associations and the New England Student Leadership Conference. Students are expected to respect each other and themselves while following the rules of the conference. The use of alcohol, tobacco and drugs is strictly prohibited. In addition, students are expected to observe the established conference and Stonehill College campus curfews each night, sleep in their assigned rooms and not visit housing areas of the opposite gender. Students are not permitted to leave the college campus. Students who violate any of the conference policies will be asked to leave at their own expense without a refund (please see page 10).

**Transportation**
Students are not permitted to drive to the conference or leave cars on the Stonehill College campus. Participants from Massachusetts should make arrangements to be dropped off at the event registration area between 1:00-3:00 pm on July 19. Participants travelling from outside Massachusetts will be contacted by their local state associations regarding travel arrangements.

**Registration**
The student registration fee to attend this conference is $185. This fee will cover the cost of meals, lodging, training, materials, and transportation during the four days. To register for this conference, please complete the items listed below and submit them to your local state association (contact information listed on page 14). The registration deadline is May 1, 2012. Registrants will be contacted by their local state association with further information upon receipt of materials.

- Student Delegate Application - Page 7
- Student Health History/Consent for Treatment - Page 8
- Release and Waiver of Liability and Indemnity Agreement - Page 9
- Student Code of Conduct - Page 10
- Elective Session Selection Form - Page 11
- Registration check in the amount of $185 made payable to your local state association
- Room key/card deposit check in the amount of $60 made payable to “Stonehill College”
Conference Overview

Application Checklist

To apply for this conference, please submit the following materials to your local state association (see page 14) before Tuesday, May 1.

___ Student Delegate Application
___ Student Health History and Consent for Treatment
___ Release and Waiver of Liability and Indemnity Agreement
___ Student Code of Conduct
___ Elective Session Selection Form
___ Registration check in the amount of $185 made payable to your local state association
___ Room key/card deposit check in the amount of $60 made payable to “Stonehill College”.  
   (Deposit checks will be returned to students when room key/cards are returned at the conclusion of the conference)

Recommended Packing List*

___ Alarm Clock
___ Pillow
___ Sneakers/Comfortable Shoes
___ Community Service Clothes/Sneakers
___ Soap, Shampoo, Toothpaste and other toiletries
___ Rain Gear/Jacket/Umbrella
___ Room Fan
   (Not all rooms will be equipped with air conditioning. Participants are highly encouraged to bring their own room fan for comfort during this conference.)
___ Sunscreen
___ Notebook/Pens
___ Snacks/Beverages
___ Spending Money

*The sponsoring state associations and Stonehill College are not responsible for any lost or stolen items.
Harvey Alston
Educator and Author

Considered one of the most dynamic, “high octane” speakers in America, Harvey Alston has been a full-time speaker since 1989. He has spoken to millions of people throughout the United States who have benefited not only from his knowledge, but also from the wisdom that Harvey Alston brings to the finish line.

Harvey Alston’s unforgettable words of individual responsibility for achievement have improved spirits, spurred growth, and changed lives. His powerful, soul-searching presentations uplift audiences to a higher standard, and to a level where they strive only for the best. Harvey Alston believes in solitary achievement, shared accomplishment and the dignity of human beings.

As one of the most in-demand speakers in America, Harvey Alston’s career has spanned positions from head football coach of Columbus East High School in Ohio in 1968, to assistant director of student financial aid at the university level. As an educator he has taught English, biology, health, life sciences and math curricula. Over the years, Harvey Alston has received recognition and awards from such diverse groups and organizations as the Ohio House of Representatives as one of Ohio’s Finest Citizens, the City of Columbus declared a Harvey Alston Day, he was commissioned a Kentucky Colonel, and he has received numerous national recognitions and awards. However, none has more impact than the response from those individuals whose lives have been dramatically changed. People walk away from Harvey Alston’s presentations knowing they have just heard someone who “has been around the track a few times” and one who shares it in a way that people do not forget. He has the courage it takes to remind people that life is only what they make it, that self-respect does not come with the job, but is brought to the job by people who do the best they can do, with whatever work is available to them.

Harvey Alston’s enterprise is called Best Inc., based on his philosophy and the book titled “Be the Best.” He is a member of the National Speakers Association and serves as advisor to many civic boards, panels, and commissions.

Additional guest speakers will be announced soon!
Student Delegate Application

Male _______ Female _______ Current Grade in School: _________ T-Shirt Size (based on men’s sizing): _________

Student First and Last Name: ____________________________________________________________

Home Address: _______________________________________________________________________

City: __________________________ State: _________ Zip: __________________________

Home Phone: __________________________ Cell Phone: __________________________

Email Address: _______________________________________________________________________

Parent/Guardian Name(s): ______________________________________________________________

Parent/Guardian Email Address: _________________________________________________________

School: _____________________________________________________________________________

School Address: ______________________________________________________________________

City: __________________________ State: _________ Zip: __________________________

School Principal: _____________________________________________________________________

Principal Email Address: ______________________________________________________________________

Principal Phone: _______________________________________________________________________

Please list all school and community activities you are involved in with an emphasis on leadership roles:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

In 200 words or less, please answer the following questions:

What does developing citizenship skills through sports and activities mean to you and how do you put your beliefs into practice in your school and community?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Why should you be chosen to attend the New England Student Leadership Conference?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

If selected as one of my state’s delegates, I agree to attend the New England Student Leadership Conference, July 19-22, 2012.

Student Signature: __________________________________________________________ Date: _________

Parent/Guardian Signature: __________________________________________ Date: _________

To be submitted with the Student Health History, Code of Conduct, Liability and Release Waiver, and Elective Session Selection Forms.

Please return to your local state association office by May 1, 2012 (contact information is located on page 14)
Student Health History and Consent for Treatment

Student First and Last Name: ____________________________________________

Male / Female Date of Birth: ___________________________ Age: __________

Home Address: _______________________________________________________

City: __________________________ State: __________________ Zip: __________

Home Phone: __________________________ Cell Phone: __________

Parent/Guardian Name #1: __________________________ Phone: __________

Home Phone: __________________________ Cell Phone: __________

Work Phone: __________________________

Parent/Guardian Name #2: __________________________ Phone: __________

Home Phone: __________________________ Cell Phone: __________

Work Phone: __________________________

Emergency Contact (Other than Parent/Guardian): _______________________

Relation to Student: __________________________ Phone: __________

Family Physician: __________________________ Phone: __________

Insurance Company: __________________________ Group Plan Number: __________

Policy Number: __________________________ Insurance Benefit Code: __________

Does the student have any special physical needs? Yes No

If yes, please explain: __________________________________________________

Does the student have any special dietary needs and/or food allergies? Yes No

If yes, please explain: __________________________________________________

Does the student have any life threatening food allergies? Yes No

If yes, please explain: __________________________________________________

Is the student allergic to any medications? (e.g. penicillin or other antibiotics, pain medications, etc.): __________________________________________________

Does the student carry an Epi-Pen? Yes No Is the student allergic to bee stings? Yes No

Can the student take antihistamines? Yes No

Is the student currently under any medical treatment? (please explain) __________________________________________________

Please list any medications the student is currently taking (including antihistamines, anti-convulsives, insulin, etc.)

________________________________________________________________________

________________________________________________________________________

Please list any special health problems (past and present):

________________________________________________________________________

________________________________________________________________________

Please list any operations the student has undergone within the past year:

________________________________________________________________________

________________________________________________________________________

Please list any emotional concerns (e.g. anxiety, depression, phobia, manic tendencies, etc.)

________________________________________________________________________

________________________________________________________________________

*I hereby give permission for the above named student to be treated by a physician or licensed nurse at a hospital or on the scene in the event of a medical or surgical emergency.*

Parent/Guardian Signature: __________________________ Date: __________

This document will be retained in confidence by the Conference Director.

To be submitted with the Student Delegate Application, Code of Conduct, Liability and Release Waiver, and Elective Session Selection Forms.

Please return to your local state association office by May 1, 2012 (contact information is located on page 14)
Release and Waiver of Liability and Indemnity Agreement

(the “Agreement”) For the New England Student Leadership Conference, July 19-22, 2012 (the “Event”)

In consideration for being permitted to observe, work for, or for any purpose participate in any way in the Event, EACH OF THE UNDERSIGNED, for him or herself, his personal representatives, heirs, next of kin, acknowledges, agrees, and represents that he has, or will immediately upon enter the Event:

RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE: Any and all sponsors of the Event, their subsidiaries, parents, affiliates, officers, directors, agents and representatives, the Event promoters, participants, venue operators and owners, city officials, competitors, technicians, any persons in any restricted area, lessees of premises used to conduct the Event and each of them, all for the purpose herein referred to as “releases”, from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any and all loss or damage, and any claim or demands therefore on account of inquiry to the persons or property resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned is in or upon any restricted areas, and/or, competing, officiating in, observing, working for, or for any purpose participating in the Event.

AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in or upon the restricted areas or in any way competing, officiating, observing, or working for, or for any purpose participating in the Event and whether caused by the negligence of the releases or otherwise.

ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to the negligence of releases or otherwise while in or upon restricted areas and/or while participating, observing, working for, or for any purpose participating in the Event. EACH OF THE UNDERSIGNED EXPRESSLY ACKNOWLEDGES AND AGREES THAT THE ACTIVITIES OF THE Event are dangerous and involve the risk of serious injury and/or property damage. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement portion thereof is intended to be as broad and inclusive as is permitted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED hereby grants permission to the sponsoring state associations, severally, full permission now and forever, with no obligation to compensate me further, to use photographs, videotapes, motion pictures, recordings, or other record of my participation for advertising and promotional materials and for any other purpose the sponsoring state associations, in its sole discretion deems necessary. This includes the posting of such photographs, recordings, or other media representation of myself, on any website, or licensing others to do so in their promotional materials or websites.

NOTICE: BY SIGNING THIS RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, RELEASEOR IS AGREEING TO HAVE ANY CLAIM DECIDED BY NEUTRAL ARBITRATION AND IS GIVING UP THE RIGHT TO A JURY OR COURT TRIAL. THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representation, statements or inducements apart from the foregoing written agreement have been made.

Print Delegate Name: ___________________________ Date: __________
Delegate Signature: ___________________________________________ Date: __________
Legal Parent/Guardian Signature: ________________________________ Date: __________

To be submitted with the Student Delegate Application, Student Health History, Code of Conduct, and Elective Session Selection Forms.
Please return to your local state association office by May 1, 2012 (contact information is located on page 14)
Student First and Last Name: __________________________________________________________

School: __________________________________________________________________________

I, the undersigned student leader, do hereby agree:

To abide by all the rules and regulations set forth by the sponsoring state associations, the Adult Delegates, and all adult supervisors.

To waive and release any and all rights and claims for any damages I may have against the sponsoring state associations, and any other employee of the state associations, for any injuries arising from my participation in this activity.

To accept responsibility for my behavior so that it does not reflect discredit on my school, my state association, or myself.

Not to use tobacco, alcohol or illegal drugs at the conference.

To treat all student and adult delegates, college and adult facilitators, conference staff, state association staff, speakers, and Stonehill College staff with respect and dignity.

I understand that if I break any of the rules of the conference that I will be sent home immediately at my own expense, after the sponsors have made arrangements with my parent/legal guardian.

Signature: ___________________________ Date: ______________

Print Name: ____________________________

I, the parent/guardian of the above signed student, understand the obligations accepted by my son/daughter as outlined above and give my consent for his/her participation in the New England Student Leadership Conference.

I do further release the sponsoring state associations, sponsors of this conference, and any other employee of said organizations from any claim for damages incurred by the said student that might be a direct or indirect outgrowth of his/her participation in this conference.

Signature: ___________________________ Date: ______________

Print Name: ____________________________

Home Address: _________________________________________________________________

Telephone Number: _____________________________________________________________

To be submitted with the Student Delegate Application, Student Health History, Liability and Release Waiver, and Elective Session Selection Forms.

Please return to your local state association office by May 1, 2012 (contact information is located on page 14)
First and Last Name: ______________________________________________________________

School: _________________________________________________________________________

Home Address: __________________________________________________________________

City: __________________________ State: _____________ Zip: __________________________

In addition to the conference curriculum and general sessions, student participants will have the opportunity to participate in two elective sessions. Each of these one-hour sessions will involve interactive discussion about a contemporary topic with an expert in the subject field. Students have the opportunity to pre-register for these sessions on a first-come, first-served basis through the use of this form. Conference staff will try to place students in the sessions of their choice. However, due to space limitations we reserve the right to place students in a session not selected on this form. Please review the following potential session topics and indicate your top areas of interest, in order of priority, in the space provided below:

- Sportsmanship
- Drug and Alcohol Prevention
- Student Leadership
- Role of the High School Captain
- Mental Toughness/Peak Performance
- College Admissions Process
- Social Networking Responsibility
- Strength and Conditioning
- Community Service Opportunities
- Collegiate Athletic Recruiting
- College Athletic Participation
- Wellness
- Bullying
- Hazing

1. ________________________________
2. ________________________________
3. ________________________________
4. ________________________________

To be submitted with the Student Delegate Application, Student Health History, Liability and Release Waiver, and Code of Conduct Forms. Please return to your local state association office by May 1, 2012 (contact information is located on page 14)
Adult Delegate Application

Male _______ Female _______ T-Shirt Size (based on men’s sizing): __________

First and Last Name: _________________________________________________________

Home Address: ______________________________________________________________

City: __________________________________________ State: __________ Zip: __________

Home Phone: ___________________________ Cell Phone: _________________________

Email Address: ___________________________________________________________________

T-Shirt Size (based on men’s sizing): ______________

School: _______________________________________________________________________

School Address: __________________________________________________________________

City: __________________________________________ State: __________ Zip: __________

School Principal: ___________________________________________________________________

Principal Email Address: ___________________________________________________________________

Principal Phone: _______________________________________________________________________

Describe the activities that you supervise, coach or advise:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

In 200 words or less, please answer the following question: What does developing citizenship skills through sports and activities mean to you and how do you put your beliefs into practice in your school and community?

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

If selected as a state delegate, I agree to attend the New England Student Leadership Conference, July 19-22, 2012.

Signature: ___________________________ Date: __________________

To be submitted with the Adult Health History and Liability and Release Waiver.

Please return to your local state association office by May 1, 2012 (contact information is located on page 14)
Adult Health History

Student First and Last Name: ________________________________________________

Male / Female  Date of Birth: ___________________  Age: ___________________

Home Address: ___________________________________________________________

City: ______________________  State: ___________________  Zip: _______________

Home Phone: ______________________  Cell Phone: ______________________

Emergency Contact Names: ________________________________________________

Home Phone: ______________________  Cell Phone: ______________________

Work Phone: ______________________

Home Phone: ______________________  Cell Phone: ______________________

Work Phone: ______________________

Physician: ______________________  Phone: ______________________

Insurance Company: ______________________  Group Plan Number: __________

Policy Number: ______________________  Insurance Benefit Code: __________

Do you have any special physical needs?  Yes  No
If yes, please explain: ____________________________________________________

Do you have any special dietary needs and/or food allergies?  Yes  No
If yes, please explain: ____________________________________________________

Do you have any life threatening food allergies?  Yes  No
If yes, please explain: ____________________________________________________

Are you allergic to any medications? (e.g. penicillin or other antibiotics, pain medications, etc.): __________________________________________________________

Do you carry an Epi-Pen?  Yes  No  Are you allergic to bee stings?  Yes  No
Can you take antihistamines?  Yes  No  Are you currently under any medical treatment? (please explain) __________________________________________________________

Please list any medications you are currently taking (including antihistamines, anti-convulsives, insulin, cardiac, etc.) __________________________________________________________

Please list any special health problems (past and present): ____________________

Please list any operations you have undergone within the past year: ______________

Please list any emotional concerns (e.g. anxiety, depression, phobia, manic tendencies, etc.) __________________________________________________________

Signature: ______________________  Date: ______________________

To be submitted with the Adult Delegate Application and Liability and Release Waiver.
Please return to your local state association office by May 1, 2012 (contact information is located on page 14)
State Association Contact Information

Please submit the required registration materials to your local state association at the address listed below by May 1, 2012. For additional information, please contact your local state association.

Connecticut Interscholastic Athletic Conference (CIAC)
30 Realty Drive
Cheshire, CT 06410-1655
Phone: (203) 250-1111
Fax: (203) 250-1345
www.casciac.org

Maine Principals' Association (MPA)
PO Box 2468
50 Industrial Drive
Augusta, ME 04338-2468
Phone: (207) 622-0217
Fax: (207) 622-1513
www.mpa.cc

Massachusetts Interscholastic Athletic Association (MIAA)
33 Forge Parkway
Franklin, MA 02038-3135
Phone: (508) 541-7997
Fax: (508) 541-9888
www.miaa.net

New Hampshire Interscholastic Athletic Association (NHIAA)
251 Clinton Street
Concord, NH 03301-8432
Phone: (603) 228-8671
Fax: (602) 225-7978
www.nhiaa.org

Rhode Island Interscholastic League (RIIL)
Building 6, R.I. College Campus
600 Mt Pleasant Avenue
Providence, RI 02908-1991
Phone: (401) 272-9844
Fax: (401) 272-9838
www.riil.org

Vermont Principals’ Association (VPA)
Two Prospect Street
Suite #3
Montpelier, VT 05602
Phone: (802) 229-0547
Fax: (802) 229-4801
www.vpaonline.org
Founded by the Congregation of Holy Cross in 1948, Stonehill College is a welcoming, academically challenging community of 2,500 students on a beautiful, active campus located 22 miles south of Boston, offering easy access to internships, job opportunities, museums, athletic events, and more. Stonehill’s dedicated and supportive faculty mentor students in more than 80 diverse majors and minors in the liberal arts, sciences, business, and pre-professional advising programs. Stonehill is a vibrant place where students learn to think, act, and lead with courage toward the creation of a more just and compassionate world. The college is a member of the Northeast-10 Conference with 20 varsity teams that compete at the NCAA Division II level. For more information, please go to www.stonehill.edu.

Directions to Campus

**From Boston and Directly North of Boston**
- At Route 3/93 split, bear right
- Follow signs for Route 93 South to Route 95 Dedham
- Stay left to Exit 4—Route 24 South/Brockton, Fall River
- Exit 17B—Route 123 West/Easton
- College is 1/2 mile on right

**From Cape Cod**
- Route 25 West into Route 495 North
- Exit 7A - Route 24 North
- Exit 17B - Route 123 West/Easton
- College is 1/2 mile on right

**From West of Boston**
- Route 90 East
- Route 95 South
- Stay on Route 95 South past Dedham
- At the junction of 95 South and 93 North, Stay in left lanes (Exit 12) for Route 93 North toward Braintree. (Do not take Route 95 South exit)
- Exit 4 - Route 24 South/Brockton, Fall River
- Exit 17B - Route 123 West/Easton
- College is 1/2 mile on right

**From Northwest of Boston**
- Route 93 South
- Exit 37B - Route 95 South
- Stay of Route 95 South past Waltham and Dedham
- At the junction of 95 South and 93 North, Stay in left lanes (Exit 12) for Route 93 North toward Braintree. (Do not take Route 95 South exit)
- Exit 4 - Route 24 South/Brockton, Fall River
- Exit 17B - Route 123 West/Easton
- College is 1/2 mile on right

**From Southern CT, Rhode Island, Southern NY and NJ**
- Route 95 North into Massachusetts
- Exit 6A - Route 495 South
- Exit 7A - Route 24 North/Boston
- Exit 17B—Route 123 West/Easton
- College is 1/2 mile on right

**From Western CT, Western MA and Northern NY**
- Route 84 East in CT or Route 90 East in MA
- Exit 11A - Route 495 South
- Exit 7A - Routh 24 North/Boston
- Exit 17B - Route 123 West/Easton
- College is 1/2 mile on right
The participating state associations give special thanks to the following organizations for making this event possible: