

North Carolina Summer Yearbook Workshop  
 July 24 - 26, 2017 @ Sunspree Resort, Wrightsville Beach



www.ncyearbooks.com



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**Kristin Stimmell**  
 Customer Service Specialist

816 Woodview Ridge Trail  
 Lewisville, NC 27023

**Workshop Director**



**Our Guest Instructor**



**JOHN CUTSINGER | Jostens Creative Account Manager**

John is a Dow Jones Newspaper Fund National Journalism Teacher of the Year, Columbia Scholastic Press Association Gold Key recipient, National Scholastic Press Association Pioneer, Southern Interscholastic Press Association Distinguished Adviser and Journalism Education Association Medal of Merit and Friend of Scholastic Journalism award winner. He recently earned his Certificate of Journalism Educators from JEA. His contributions to scholastic journalism over the past 35 years have included advising state and national award winning yearbooks, newspapers and magazines; authoring yearbook curriculum and countless journal articles; teaching/speaking at conferences and conventions across the nation; and sharing ideas with thousands of advisers and staffs. John recently received the prestigious Legend Award from Jostens.

**THE YEARBOOK**

**Tentative Schedule**

**MONDAY**

10:00am-12:00pm Registration  
 12:30-2:30pm **Opening Session** | IN Character | Theme  
 Theme Planning  
 Break  
 3:30-3:45pm Break  
 3:45-4:45pm **The INSIDE Story** | Coverage  
**All IN** | Photography with Cade Cleavelin  
 Dinner  
 6:00-7:30pm **IN Words & Pictures** | Module Building  
 Design Planning  
 8:15-9:30pm Campers in Rooms  
 10:00pm Room Check  
 11:00pm

**TUESDAY**

7:15-8:15am Breakfast  
**8:30-9:30am Everything IN Its Place** | Graphic Design  
 Yearbook Planning  
 Break  
**Information Please** | Captions and Headlines  
 Lunch  
 Staff Planning Time (Location TBD)  
**New Adviser Training** (Any Adviser May Attend)  
 Dinner With Your Staff  
 Yearbook Staffs Work Together  
 Adviser Coffee and Dessert  
 8:00-9:00 Campers in Rooms  
 10:00pm Room Check  
 11:00pm

**WEDNESDAY**

7:15-8:15am Breakfast  
**8:30-9:30am IN Hot Pursuit** | Business Matters  
 Marketing Planning  
 Awards Assembly | Winning Ideas  
 Departure  
 11:00am  
 12:00pm

\*NAVY indicates main sessions led by Cutsinger and your NC Reps  
 New Adviser Training Tuesday afternoon (any adviser may attend)



# North Carolina Summer Yearbook Workshop

Monday-Wednesday, July 24 - 26, 2017 | Wrightsville Beach Sunspree Resort

Mail all completed registrations with payment to **Jostens NC Workshop**

Kristin Stimmell @ 816 Woodview Ridge Trail Lewisville, NC 27023 (919) 818.9279

Make registration easy and register at [www.NCYearbooks.com/workshops](http://www.NCYearbooks.com/workshops)

## School Info

School \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

School Colors & Mascot: \_\_\_\_\_

Rep \_\_\_\_\_ Job # \_\_\_\_\_

## Adviser Info

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_  
(Make sure we have a summer email address)

Circle: Male or Female / T-Shirt Size: \_\_\_\_\_

## Student Info

Name \_\_\_\_\_

Circle: Male or Female / T-Shirt Size: \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Parent Phone: \_\_\_\_\_

## Hotel Reservations/Cancellations

Reservations will be handled by the Workshop Director, Kristin Stimmell. No refunds after June 6, 2017. However, school may replace a yearbook staff member as long as the replacement is the same gender as the previously paid registrant.

## COMPLETE ALL SCHOOL & ADVISER INFORMATION

Then photocopy for all participants. All information must be complete to be processed.

## PRINT LEGIBLY PLEASE.

Registration and payment must be postmarked by Tuesday, June 6, 2017 to honor your reservation.

Confirmation will be sent to you within one week of receipt of payment and registration.

The medical release form below must be completed for every adult and student participant.

[www.ncyearbooks.com](http://www.ncyearbooks.com)

## Workshop Payment

(Price per person includes room, meals, workshop)

Quad: 4 per room (not available for advisers unless from same school) \$365 \_\_\_\_\_

Triple: 3 per room (not available for advisers unless from same school) \$400 \_\_\_\_\_

\*Double: 2 per room (limited number of rooms available) \$500 \_\_\_\_\_

\*Unless from same school, male campers pay for double rooms with 2 per room)

Single (very limited number of rooms available) \$950 \_\_\_\_\_

Commuter \$285 \_\_\_\_\_

Photography Track (per registrant) \$50 \_\_\_\_\_

Advisers \$25 discount on all rates except commuter -\$25 \_\_\_\_\_

Late Fee (after June 6, 2017 no exceptions) \$50 \_\_\_\_\_

(Food vouchers for outside guests \$100 per person and may be purchased through Kristin) \$100 \_\_\_\_\_

Total \$ \_\_\_\_\_

**Make check or money order payable to: Jostens NC Workshop** Full payment or purchase order must accompany registration forms. **No unpaid reservations will be honored. Registration will be processed on a first come-first served basis.** Registration includes hotel room, workshop instruction, materials and meals as noted on schedule. Mail completed registrations with payment to Workshop Director: Kristin Stimmell @ 816 Woodview Ridge Trail Lewisville, NC 27023 **Credit Card payments available through Pay Pal (Just request)**

## Medical Release Information

In consideration of the educational opportunity provided, the above student or adult, I/we the parent(s), legal guardian(s), or spouse of the above named person, or myself, do hereby hold harmless, release and forever discharge Jostens, Inc., Jostens Representatives, Creative Accounts Manager and Jostens NC Workshop at which the workshop described herein will be held, and their officers, agents and employees from any and all claims, demands, liability, actions, causes of action attorney fees and expenses on account of damages to personal property or personal injury which may result from causes beyond the control of, and/or without the fault or negligence of Jostens, Inc. the named sales representatives and employees, during the workshop.

I/we also give permission that medical attention be administered to the above named or myself in case of emergency. I/we understand that any medical assistance of a more serious nature will be brought to our/my attention as conditions permit. I understand that the emergency contact will be notified as soon as such communication can be made.

In case emergency treatment is required, my/our health insurance plan number and carrier are:

insurance carrier \_\_\_\_\_

policy number \_\_\_\_\_

parent or guardian adult's signature \_\_\_\_\_

date \_\_\_\_\_

### emergency contact

name \_\_\_\_\_

phone # \_\_\_\_\_

alternate contact \_\_\_\_\_

phone # \_\_\_\_\_