



For over 25 years, the Michigan Coalition Against Domestic and Sexual Violence has been a leader in the movement to end violence against women. Central to our mission is the provision

Beyond Taking a Stand kicks off a statewide initiative for engaging men as allies. This unique event offers inspiration and support for creating meaningful cultural shifts that no longer tolerate violence against women in Michigan.

Our guest speaker, Anthony Porter, is a co-founder of A Call To Men: National Association of Men and Women Committed to Ending Violence Against Women. Mr. Porter is an educator and activist (as well as a husband and father) who has worked in the social justice arena for over twenty years.

Following a reception with members and friends of MCADSV, Mr. Porter will share his organization's vision of a national movement of men committed to ending violence against women and working together to challenge the social norms that support sexism and violence in our communities.

"Violence against women will not end until men become part of the solution, and leadership from women is required in order for all of us to become successful." Anthony Porter

SEPTEMBER 14, 2006

SHERATON LANSING HOTEL - LANSING

Reception: 3:00 p.m.

Program: 4:30 p.m. - 6:00 p.m.

Dinner: 6:00 p.m. - 7:00 p.m.

Auction: 7:00 p.m. - 9:00 p.m.

of quality training to professionals working with survivors of domestic violence

and sexual assault. We strive to ensure that our training includes the most current best practices to service delivery.

MCADSV wishes to thank the Batterer Intervention Services Coalition of Michigan, Michigan Department of Community Health, Michigan Domestic Violence Prevention and Treatment Board, and the Nine Tuna Foundation for their financial support of this project.

**BEYOND
TAKING
A STAND**

This project was funded by the Michigan Department of Community Health through a supplement to grant # 20060385 from the Centers for Disease Control and Prevention. / This training is also supported in part through Cooperative Agreement US4/CCU522485-04 from the Centers for Disease Control and Prevention. The contents of this workshop are solely the responsibility of the presenter and do not necessarily represent the official view of the funder.

BEYOND TAKING A STAND

September 14, 2006
Sheraton Hotel
925 S. Creyts Rd.
Lansing, MI 48917

Registration Deadline
is
SEPTEMBER 8, 2006!

**DON'T MISS
THIS
VALUABLE
OPPORTUNITY
AS WE
LAUNCH OUR
STATEWIDE
INITIATIVE**

Questions?
Call Lynn Lucas at
(517) 347-7000, ext. 21.



MCADSV

Michigan Coalition Against Domestic and Sexual Violence

REGISTRATION FORM

Ph: (517) 347-7000 Fax: (517) 347-1377 TTY: (517) 381-8470 www.mcadsv.org

Participant Information

Name: _____ Circle One: Ms. Mrs. Miss Mr. Dr.

Title: _____

Organization: _____

Address: _____

City: _____ State/Zip: _____

Phone (work): _____ Phone (home): _____

Fax: _____ E-mail: _____

Confirmations will be sent via e-mail when possible.

Please list any special dietary needs: _____

Other Accommodation Needs: _____

If you need any special accommodations to participate in this event, contact Lynn Lucas at (517) 347-7000, ext. 21 by September 8, 2006.

My professional affiliation is (please check the one that best fits):

- Attorney/Law Student Batterer Intervention Program Child Welfare/Children's Advocate Community Advocacy Organization Corrections Personnel Court Personnel Domestic Violence Program Dual Program Faith-Based Organization Health Professional Law Enforcement Officer Legal Services Mental Health Professional Prosecutor Sex Offender Treatment Program Sexual Assault Forensic Examiner Sexual Assault Program Social Service Organization Tribal Government Agency University Victim-witness Specialist Other: _____

Payment Information

The cost of this event is **\$35.00**. Fee includes reception, keynote, dinner, and auction. Confirmations will be sent by 09/11/06. If you do not receive a confirmation, please contact MCADSV to verify your registration.

I would like to invest in this initiative by making an additional financial contribution in the amount of \$_____. Please add this amount to my total owed to be paid for with the enclosed check or credit card information.

Registration Deadline is September 8, 2006

Total Enclosed: \$_____ Check Visa Mastercard AmEx Discover

Name on Card: _____

Account Number: _____ Exp. Date: _____

Signature: _____ Date: _____

Send registration form (one form per person) with payment to:

MCADSV, Attention: Accounts Receivable

3893 Okemos Rd., Ste. B2

Okemos, MI 48864

Fax: (517) 347-1377

MCADSV Use Only: Check #/Auth#: _____ Amt Applied: _____ Total Amt: _____

Gift Date: _____ Deposit#: _____ Deposit Date: _____