



Join President Obama's Call to Action to Create Community Solutions on Mental Health



Saturday, July 20, 2013

9:30 AM - 3:30 PM

Doors Open at 9:00 AM

Sacramento Convention Center
1400 J Street, Sacramento, CA 95814

FREE, INTERACTIVE COMMUNITY CONVERSATION
LUNCH AND REFRESHMENTS WILL BE SERVED

TO REGISTER go to www.creatingcommunitysolutions.org
and click on the Sacramento button on the map

As part of the National Dialogue on Mental Health, *Creating Community Solutions - Sacramento*, will be a unique opportunity for citizens and youth in Sacramento County and West Sacramento to learn about mental health - in a safe and welcoming environment - and to recommend priority strategies and actions to improve the lives of those living with mental health issues, **especially for our youth.**

Join hundreds of citizens engaged in small group conversations that move beyond stereotypes and stigmas and toward solutions that improve our mental health and mental health systems. The priorities developed in *Creating Community Solutions - Sacramento*, will be handed off to a team of public and private partners that will ensure the results are implemented through a community-wide action plan.



This is an essential Community Conversation for our area and we want to add your voice to the discussion!

REGISTER TODAY, SEATING IS LIMITED

TO REGISTER go to www.creatingcommunitysolutions.org and click on the Sacramento button on the map OR complete and mail in the form to 2572 21st Street, Sacramento, CA 95818, or fax to (916) 527-0856, or leave a message at (916) 500-4856.

First and Last Name: _____

Email: _____

Street _____

City: _____ Zip: _____ Phone number: _____

HOW DID YOU HEAR ABOUT THE MEETING?

- Flyer/Poster
- Neighborhood/Civic/Community Organization
- Website
- Email/Call from friend, family, or colleague
- Email/Call from Service/City Agency
- Other

RELATION TO MENTAL HEALTH: (REQUIRED)

- Provider of mental health services in the community
- Have direct experience with mental health issues with a family or friend
- Have direct personal experience with mental health issues
- All of the above
- None of the above

This information will be kept confidential and will only be used to ensure the area's diversity is represented.

ADDITIONAL SERVICES WILL BE PROVIDED:

CHILD CARE: Number _____
(must be out of diapers)

Age of each child _____

AGE: (REQUIRED)

- 14-18 35-44 65 and better
- 19-24 45-54
- 25-34 55-64

GENDER:

- Female Male

RACE: (REQUIRED)

- Asian American/Pacific Islander White/Caucasian
- Black/African American More than one race
- Latino/Hispanic Other
- Native American/American Indian

EDUCATION LEVEL:

- Elementary or Middle School Some College
- Some High School College Graduate (including Associate degree)
- High School Graduate Post-collegiate Degree

MATERIAL TRANSLATION:

- Spanish Vietnamese
- Hmong Russian
- Chinese Other

LANGUAGE INTERPRETATION DURING THE COMMUNITY CONVERSATION:

- Spanish Russian
- Hmong Sign Language
- Chinese Other
- Vietnamese

TRANSPORTATION ASSISTANCE

(limited assistance will be available to some areas)

OTHER SERVICES: _____

TEAR OFF & SUBMIT

