

1978 - 2018



***Parents Of Murdered Children, Inc.***  
*For the families and friends of those who have died by violence.*

***32nd Annual National Conference***  
August 2-5, 2018

DoubleTree by Hilton Hotel, Washington DC- Crystal City

Hosted by the POMC National Conference Committee

Conference Co-Chair: Bev Warnock

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**Important Dates:**

**Conference Registration Deadline: July 1, 2018**

**Memorial Book Deadline: June 1, 2018**

**Photos for Video & Photo Wall: June 8, 2018**

**Hotel Reservation Deadline: July 12, 2018**

## POMC CONFERENCE SITE / HOTEL INFORMATION

The DoubleTree by Hilton- Washington DC will be the site of the 2018 Conference. The hotel rate is \$109.00 plus tax per night for Conference attendees. Hotel reservations should be made by contacting the hotel **no later than July 12, 2018. To obtain the special room rate, please indicate you are attending the POMC Conference. A limited number of rooms will be guaranteed at this rate. Please make reservations as soon as possible.** Check-in time is 4:00 pm and check-out time is 11:00 am.

### **DoubleTree by Hilton Hotel- Washington DC- Crystal City**

300 Army Navy Drive  
Arlington, VA 22202  
(703) 416-4100

### **Click here for hotel booking**

<https://aws.passkey.com/e/49368756>

## TRANSPORTATION & HOTEL PARKING

Ronald Reagan International Airport (DCA)- Arlington, VA 22202

Hotel Parking: DoubleTree by Hilton Washington DC- Crystal City parking is \$19.00.

Shuttle: Free Airport Shuttle to Hotel

## REGISTRATION

The Conference registration fee provides admission to all workshops, Lunch on Friday and Saturday, Memorial Dinner on Friday, Awards Banquet on Saturday, Brunch on Sunday, and a Conference Memorial Book and tote. **REGISTRATION DEADLINE is July 1, 2018.** A \$30.00 late fee will be assessed after July 1<sup>st</sup>.

The Registration Form and Online Registration are available at [www.pomc.org](http://www.pomc.org). Conference check-in begins on Thursday, August 2nd at 1:00pm; Friday, August 3rd at 7:30am; and Saturday August 4th at 7:30am. **Attendees must check-in to receive conference information, meal tickets etc . Conference ID must be worn for entry into all events.**

## MEALS

A meal ticket is required for entry and re-entry into the banquet room and at the table to confirm your food selection. Table counts are based on registration, so please invite others to join your table to fill-in all seats at every table.

## WORKSHOP & TABLE HOSTING

You may wish to **Sponsor a Workshop**. A sign will be posted outside the workshop, stating "In Honor of (the person of your choice)" or "In Memory of (a loved one)" for a donation of \$75.00 per workshop. You may take the sign after the workshop as a keepsake.

**Table Sponsorship ("Host")** will be available this year. To be a Table Host, you need to agree to let us know how many people you will be hosting at your table of 10 people for the 5 meals. The "Host" is also responsible for hospitality toward those who would fill any seats your group does not occupy. The table may be dedicated to a loved one, or in honor of your Chapter. You may "Host" a table for a donation of \$75. \*\*\*Table Host signs will rotate after each meal/event. Allow a little time to find your new location. **We will only be reserving 20 tables and will not reserve a table after the first 20 are reserved. So get your reservations in early.**

## DONATIONS

### AUCTIONS & TEDDY BEARS

There will be auctions, a Teddy Bear raffle and other raffles based on donations received. All donations for these events will be gratefully accepted. Proceeds will help defray the costs of the Conference. Ideas for auction/raffle items are: theme baskets, handcrafted items, jewelry, signed celebrity items, resort weekend stays, art work, local or cultural items, etc. Please visit your favorite local stores and ask them to donate items for our auction and/or raffle. Also include any special features or restrictions (expiration dates, etc.), letter of authenticity, brochures, maps, calendars or instructions to add to the display at the auction.

The Teddy Bear raffle has been a favorite of past National Conferences. Dress up a teddy bear in memory of your loved one. Include your loved one's name, picture, and any information you may wish to share. Attach your contact information if you would like to correspond with the recipient of your Teddy Bear.

**All donations for the auctions and raffles must be received by July 11, 2018.**

**Ship items to:**

POMC  
C/O Lee McCray  
PO Box 400  
Hughesville, MD  
20637-0400

Thank you for your help  
and contributions!

We truly appreciate your generosity!

**Donated items can be accepted at the Conference.**

### MEMORIALS - HONORING YOUR LOVED ONES

#### MEMORIAL BOOK

The Conference Memorial Book is a keepsake you will cherish for years to come. The booklet contains a detailed conference agenda and information. The majority of the pages are dedicated to our loved ones as a lasting memorial. Donations to dedicate a space for a memorial to your loved one (photos, poems, etc.) are \$35.00 for a quarter page, \$65.00 for a half page, and \$125.00 for a full page.

Submissions must be received by **June 1, 2018** with your Registration Form. Please email photos to: [pomconference@gmail.com](mailto:pomconference@gmail.com) or mail to POMC, 635 West 7th Street, Suite 104, Cincinnati, OH 45203. ***Please clearly print your name, your loved one's name, age, birth and death dates on the back of photo.*** Do not send originals! **Photos will not be returned by mail**, but may be picked up at the Conference. Photos not retrieved at the Conference will be forwarded to National POMC. We do not retain memorials on file; therefore, new submissions are required each year.

#### MEMORIAL SERVICE & PICTURE WALL

The Memorial Service on Friday night is a very moving part of the Conference. A video of the photos of our loved ones is part of the service. You may light a candle as your loved one's photo is displayed. In addition, the photos are used on the Picture Wall that is displayed throughout the Conference. There are **no fees** for including your loved one's photo in the video or Picture Wall. However, submissions for the Memorial Service video and/or the Picture Wall **must be received by June 8, 2018**, separate from photos submitted for the Memorial Book. **Please submit a 5x7 inch photo for this purpose. We cannot accept photos if you aren't attending the Conference.**

**\*\*Please check here** if there is a photo on file from last year. No need to send a photo we have it from last year.

Please email photos to [pomconference@gmail.com](mailto:pomconference@gmail.com) or mail to POMC, 635 West 7th Street, Suite 104, Cincinnati, OH 45203. When sending photos, **do not send originals!** Photos will not be returned, but may be picked up at the Conference. ***Please clearly print your name, your loved one's name, age, birth and death dates on the back of the photo.***

## TENTATIVE CONFERENCE SCHEDULE

### Thursday, August 2, 2018

(1:00pm – 5:45pm Registration)

8:00am - 4:00pm National Board of Trustees Meeting (anyone may attend the Board Meeting)  
 4:00pm - 5:00pm Orientation for First Time Attendees  
 6:00pm - 7:00pm Murder Wall Unveiling & Welcome  
 8:00pm – 9:00pm CP/CL Meeting

### Friday, August 3, 2018

(7:30am – 5:00pm Registration)

8:00am Opening Ceremony, Friday includes: Workshops,  
 Lunch Dinner & Memorial Service

### Saturday, August 4, 2018

(7:30am – 5:00pm Registration)

8:30am - 4:45pm Workshops, Lunch  
 6:00pm - 9:00pm Dinner & Awards Banquet

### Sunday, August 5, 2018

8:30am - 9:30am Non-Denominational Church Service  
 10:00am - 12:30pm Brunch & Closing Ceremony

\*\*\*\*\*

### TENTATIVE WORKSHOPS (Not a final list)

Fathers Grief	The Courage to Grieve
Mothers Grief	Children and Grief Development
Long Time Survivors	Giving Back is Not Giving In
Sibling Grief	When a Child Becomes the Parent: Effects on the Sibling
Ask the Medical Examiner	When Your Child's Lifestyle is Judged
How Much Did My Loved One Suffer?	CP/CL Meeting & Recertification
Prison Life	DNA & Solving Cold Cases
Cultural Sensitivity	Vicarious Trauma, Burnout and Caring Overload
Overcoming Survivors Guilt	Preparing for a Parole Hearing
Criminal Personality & Murder	Yoga/ Dance

\*\* Other workshop topics will be offered, as well as topics for the evening round tables.

\*A space will be available for journaling, photo-journaling and  
 scrapbooking while at the conference.

Please bring photos & necessary items with you.

# 32<sup>nd</sup> Annual POMC National Conference Registration Form

(Please print or type. **One person per form.** Make copies as required.)

Name: \_\_\_\_\_ Chapter \_\_\_\_\_

Organization: \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Are You? (Check One): Professional \_\_\_\_\_ Parent \_\_\_\_\_ Sibling \_\_\_\_\_ Spouse \_\_\_\_\_ Grandparent \_\_\_\_\_ Aunt/Uncle \_\_\_\_\_

Adult Child \_\_\_\_\_ Other \_\_\_\_\_ (Please specify) \_\_\_\_\_

Check if: This is your First Conference \_\_\_\_\_ You are Newly Bereaved (less than a year) \_\_\_\_\_

**Loved One's Name** \_\_\_\_\_ **Age** \_\_\_\_\_ **DOB** \_\_\_\_\_ **DOD** \_\_\_\_\_

(If more than one loved one, please attach a separate sheet)

### Full Registration Includes Five Meals (Make choices below):

Adult Registration with meals \$240.00 \$ \_\_\_\_\_

Child Registration (12 & under) w/ meals (Chef's choice) \$125.00 \$ \_\_\_\_\_

Late Fee (After July 1<sup>st</sup>) \$ 30.00 \$ \_\_\_\_\_

### Partial Registration Options:

One Day Registration w/Meals: Friday \_\_\_\_\_ OR Saturday \_\_\_\_\_ \$125.00 \$ \_\_\_\_\_

Friday Night Memorial Service with Dinner \$ 70.00 \$ \_\_\_\_\_

Saturday Night Awards Banquet with Dinner \$ 75.00 \$ \_\_\_\_\_

**TOTAL REGISTRATION FEES** \$ \_\_\_\_\_

### Meal Choices:

Vegetarian (Chef's Choice) \_\_\_\_\_ Kid's Meal (12 & Under, Chef's Choice) \_\_\_\_\_

Food Allergies/Restrictions (Please specify) \_\_\_\_\_

Friday Lunch: Roasted Turkey Breast on Focaccia Bread with Mixed Greens \_\_\_\_\_ Chicken Cobb Salad with Vegetable Soup \_\_\_\_\_

Friday Memorial Dinner: Grilled Boneless/Skinless Chicken Breast \_\_\_\_\_ Beef Short Rib \_\_\_\_\_

Saturday Lunch: Chicken Caesar Salad with Vegetable Minestrone \_\_\_\_\_ Deluxe Ham Sandwich with Vegetable Minestrone \_\_\_\_\_

Saturday Banquet: Grilled Cod Filet with Corn Puree \_\_\_\_\_ Herb Roasted Chicken w/ Parmesan White Beans \_\_\_\_\_

Sunday Brunch & Closing Ceremony: Will you be attending? Yes \_\_\_\_\_ No \_\_\_\_\_

### Table Host:

Please reserve # \_\_\_\_\_ table(s) @ \$75 Table Name \_\_\_\_\_ \$ \_\_\_\_\_

\*Each \$75 donation reserves 1 table for 5 Conference meals. All seats must be occupied.

\*\*Only 20 Tables will be reserved. Get your reservation in early to assure a table.

\*\*\*\*Please indicate number of people in your party \_\_\_\_\_

I wish to sponsor a workshop (\$75.00 sponsors one workshop with a keepsake sign at workshop entrance): \$ \_\_\_\_\_

In Memory of \_\_\_\_\_ OR

In Honor of \_\_\_\_\_

**Donation:** I am enclosing a monetary donation to support the Conference. \$ \_\_\_\_\_

**SUBTOTAL THIS PAGE**

## Memorial Service Video and Picture Wall Photos

Yes, I want my loved one's 5x7 inch photo included in the Memorial Service and on the Picture Wall. **I must be present at the Conference for my loved one's photo to be included in the Video** and Picture Wall. There is no charge for inclusion in the Video or on the Picture Wall. You can also email photos to [pomcconference@gmail.com](mailto:pomcconference@gmail.com).

\*\*\*\*Please clearly print loved one's info.\*\*\*

Loved One's Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_ DOD \_\_\_\_\_

Check here \_\_\_\_\_ if there is already a picture on file from last year.

## Memorial Book

You may design a special page with photos, names, poems, etc. Many photographs do not reproduce well, so test your photo/copy at a copy shop to ensure good reproduction before submission, as they will be included as submitted. **Please clearly print loved one's info.**

Yes, I want to purchase a spot in the Memorial Book \_\_\_\_\_

Loved One's Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_ DOD \_\_\_\_\_

**\*\*Do not send original photos for Memorial Book, Video or Picture Wall\*\* Photos will not be returned**, but may be retrieved at the Conference. You can also email photos to [pomcconference@gmail.com](mailto:pomcconference@gmail.com). Photos not retrieved at the Conference will be forwarded to National POMC. Submissions must be received by **June 1, 2018**. Please write your name, your loved one's name, age, date of birth, and date of death on the back of the photograph/copy. Please make sure that you separate your name from your loved one's information.

### SUBTOTAL FROM PRIOR PAGE

\$ \_\_\_\_\_

#### Memorial Book Page

Full Page	\$125.00	\$ _____
Half Page	\$ 65.00	\$ _____
Quarter Page	\$ 35.00	\$ _____

### TOTAL FOR MEMORIAL BOOK

\$ \_\_\_\_\_

#### Conference T-Shirts (Pick up at Conference)

Size	Qty	Price	
SM	_____	\$15.00	\$ _____
MED	_____	\$15.00	\$ _____
LG	_____	\$15.00	\$ _____
XL	_____	\$15.00	\$ _____
XXL	_____	\$18.00	\$ _____
XXXL (3xl)	_____	\$18.00	\$ _____
XXXXL (4xl)	_____	\$18.00	\$ _____
XXXXXL (5xl)	_____	\$18.00	\$ _____

\*\*Shipping per shirt (for non-attende) \$5.00 ea. \$ \_\_\_\_\_

### TOTAL FOR T-SHIRTS

\$ \_\_\_\_\_

### CONFERENCE GRAND TOTAL

\$ \_\_\_\_\_

**Make Checks/Money Orders payable to: POMC 2018 National Conference.** Mail payment with Registration Form to 2018 POMC Conference, 635 West 7th Street, Suite 104, Cincinnati, OH 45203 or email to [pomcconference@gmail.com](mailto:pomcconference@gmail.com).

#### Method of Payment (Please circle one):

CHECK \_\_\_\_\_ MONEY ORDER \_\_\_\_\_ VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_ AMER. EXPRESS \_\_\_\_\_ DISCOVER \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ 3-4 digit # back of card \_\_\_\_\_

Cardholder Name (print) \_\_\_\_\_ Signature \_\_\_\_\_

Cardholder Address (if different from above) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_