



Henderson County High School

State Meeting Information Packet

To: Henderson County High School FCCLA Members
& Parents/Guardians

From: Ms. Emily Johnston, Mrs. Ginny Johnson, Ms. Gina Meyers, Ms. Catherine Gray
FCCLA Advisors

Date: February 18, 2013

Subject: State FCCLA Information

The 68th Annual State Meeting of the Kentucky Association of Family, Career, and Community Leaders of America will be held at the Galt House in Louisville, Kentucky, March 25-27, 2013. The theme for the meeting is "Kentucky FCCLA: Adventures in Leadership Land". This is a great opportunity for our members to meet others from across the state and discuss issues related to Family, Career, and Community Leaders of America.

In this packet you will find a schedule of events, price list, medical release/permission forms, dress code information and deposit/contract signature form. Be sure to note the time of departure on March 25, 2013 and the arrival time on March 27, 2013. Also, check the due dates of all deposits. Any deposit or forms not received by the due date will place that student on the ineligible list.

We hope all will be able to participate!

Ms. Emily Johnston, Mrs. Ginny Johnson, Ms. Gina Meyers, Ms. Catherine Gray

Enclosures: Departure/Arrival Schedule & Schedule of Events
Deposit Cost/Contract
Code of Conduct
Dress Code
FCCLA State Medical Release/Parent Permission Form



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Departure/Arrival Schedule

March 25, 2013	Departure: 6:00 AM (CST) from Henderson County High School Arrival: 8:30 AM (EST) Galt House in Louisville, Kentucky
March 27, 2013	Departure: 2:00 PM (EST) from Galt House in Louisville, Kentucky Arrival: 2:45 PM (CST) Henderson County High School

Tentative Schedule of Events

Monday March 25, 2013

7:30 AM-9:00 PM	Registration
10:00 AM-5:00 PM	STAR Event Competition
10:00- 5:00 PM	Nominating Committee/ Officer Candidates Meeting & Round Robin
3:15-4:15	Pre conference Speaker and activities
5:30-6:00	Officer Candidate Speeches and Onstage question
8:00- 10:00 PM	Opening General Session
10:15-11:00 PM	Mad Hatters Meet and Greet/ Alumni Business meeting
11:30 PM	Curfew

Tuesday March 26, 2013

8:00 AM- 3:00 PM	Registration
8:00 AM	STAR Event Judges Orientation
9:00 -12:00	EXHIBIT Area-
10:00 AM-2:00 PM	STAR Event Competition
10:00- 11:30	Concurrent Sessions
1:00 PM- 2:30 PM	Business Session, Power of One, & Degrees Recognition
2:30 -4:00PM	Nominating Committee Meetings & Interviews
5:45 PM	Decade of Service / Scholarship Rehearsal
6:30 PM	Guest Assembly & Banquet- included with registration
10:00 PM	ACTIVITY
11:30 PM	Curfew

Wednesday March 27, 2013

	Hotel Check Out
9:00-11:30	STAR Events Recognition & Closing Session
11:45	Meeting with National Meeting Delegates
12:30	Meeting 2013-2014 Officers & Advisers
1:00-3:00PM	Bus Loading



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FCCLA CODE OF CONDUCT & DRESS CODE

GENERAL

1. All members shall behave themselves at all times as ladies and gentlemen and refrain from actions that might bring discredit up themselves, their school their families and friends, or upon the state association.
2. Appropriate dress shall be worn to all sessions. Jeans, shorts sweatpants and other extremely casual attire should not be worn in the lobby, restaurants, or meeting rooms. It is in poor taste to go barefoot anywhere in the hotel. Appropriate dress for banquet should be dresses, suits, and/or shirt/tie. NO JEANS (Party dresses or formals are not required). Remember this is a professional meeting.
3. Name badges must be worn at all times while in the hotel.
4. No member will use or possess alcoholic beverages or drugs. (See Policy/Procedure Manual for disciplinary actions).
5. Advisers will carefully check each room occupied by their members before leaving the hotel. Any damage is the responsibility of the individual. All hotel keys should be turned in before departure.

SESSIONS

1. Be on time for all sessions. It is rude to be late.
2. Please refrain from talking and eating during the sessions.
3. Leave only between speakers, if necessary.
4. Thank the speakers for taking time to present at our meeting.
5. Wear professional attire to all sessions. NO JEANS allowed

HOTELS

1. Sleeping areas are off limits for loud talking, parties, or congregations in the halls. Curfews must be followed.
2. Radios, televisions and any other electrical equipment should be kept at a low level.
3. To aid housekeeping staff, keep personal items picked up in your room and put trash in trash cans.
4. Be informed of fire escape routes and exits.
5. Keep doors closed at all times. Anyone knocking should identify himself or herself.

DRESS CODE

All Attendees are to dress with khaki or black pants and a red, white, or black polo or button down shirt. This is as adopted by national dress code. The Banquet attire will remain the same with individuals dressing formally. **PLEASE NOTE: NO JEANS ARE TO BE WORN AT ANY SESSION DURING THE CONFERENCE.** Session are held throughout the day, at night you will be able to wear jeans. No low cut shirts or too short shorts/skirts.



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Price List

Meeting Registration Fee: 95.00 (The banquet meal is included in this price.)
Room Pricing: \$75.00 per student (this is for 2 nights stay)

Note: HCHS FCCLA chapter will be paying for students' meeting registration fee and room fee.

Meals:

Members will be on their own for meals. They will need to also bring their own snacks. We will be away for two breakfasts (be sure to bring a snack the day of we depart as we will not be stopping for breakfast), three lunches and two suppers (one supper is included). The banquet includes a meal on Tuesday night (Banquet is included in the registration fee). There are many restaurants located in and around the Galt House that we as a group will visit. We suggest bringing pop-tarts or fruit for breakfast and \$75.00- \$100.00 for food/spending money.

Contract/Deposit

Each student attending state competition is **REQUIRED** to include a deposit check in the amount of \$170.00 in the event of non-attendance at state meeting, non-attendance at state competition, and/or damage of property (hotel room/ school SUV). Note: If none of these events occur your check will be given back to you upon return from state meeting on 3/27/13.

Deposit Date:

Your deposit check must be received by **Monday February 25th, 2013** in order to attend the state meeting.

* Any deposit or forms not received by the due date will place that student on the ineligible list.*

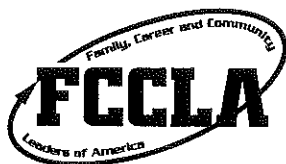
Please make all checks out to HCHS-FCCLA

Please detach the signed permission form below and sign and attach your deposit check and medical release form

I hereby state by signing this form that I am the legal guardian of _____ and as such, give my permission for him/her to ride in a Henderson County School SUV and attend the KY FCCLA State Meeting/Competition in Louisville, KY on March 25th – March 27th 2013. I understand that by signing below I give consent for the deposit check attached to be deposited in the event of non-attendance at state meeting, non-attendance at state competition, and/or damage of property (hotel room/ school SUV).

Signature of Legal Guardian: _____ Date: _____

Signature of Student: _____ Date: _____



**KENTUCKY DEPARTMENT OF EDUCATION
CAREER & TECHNICAL STUDENT ORGANIZATION ACTIVITY
MEDICAL RELEASE/PARENT PERMISSION FORM***

INSTRUCTIONS: Students, parents/guardians and Chapter Advisers must complete this form for each student adult/participant as a prerequisite for the adult/student to attend the career and technical student organization activity. Each chapter adviser must bring the completed forms to the student activity. (Some events require that these forms be turned in—make sure you have another copy in cases such as this.)

Student _____
Spouse _____
(if married)
Home Address _____
Phone: Work _____ Home _____
Date of Birth _____ SS# _____
Student's Doctor _____
Address _____
Phone: Work _____ Home _____
Race _____ (Requested by USDA)

Parent/Guardian _____
Address _____
Phone: Work _____ Home _____
Alternate Contact _____
Address _____
Phone: Work _____ Home _____
Adviser _____
School _____
Administrator _____
School Phone _____

Student covered by group or other medical insurance as follows:

Name of Insured _____
Group Number _____

Insurance Co. _____
Policy Number _____

Please describe completely any medical condition (past or present) being treated, which may recur or be a factor in medical treatment (include allergies, medicine reactions, disease of any kind, physical handicaps, heart or lung problems, seizures, convulsions, blackouts, etc.) If currently taking medication, the prescribing physician and phone number:

(Attach a separate form if necessary)

Is there any reason why the participant cannot participate in strenuous activity?

Circle one: Yes No Explain if Yes:

Parent or Guardian please check one and sign:

_____ I give permission for immediate medical treatment as required in the judgment of the attending physician. Notify me and/or any person listed above as soon as possible.

Parent/Guardian Signature _____ Date _____

_____ I DO NOT give permission for medical treatment until I have been contacted.

Parent/Guardian Signature _____ Date _____

I certify that the information described above is accurate and complete to the best of my knowledge. I understand that each individual is responsible for his/her own insurance coverage during this activity (secondary policies are available by FCCLA for certain activities). I give my permission for _____ to attend _____ and hereby release the national, regional, state and local organization, and any adult in charge of the group from any legal or financial responsibility in respect to my person or my student's participation.

Signature of Parent/Guardian _____ Date _____

Signature of Student _____ Date _____

Chapter _____