

TOP SECRET

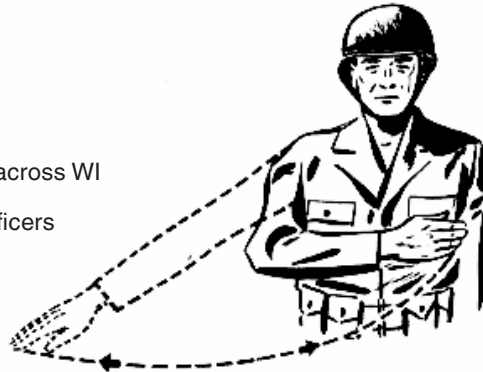
WI DECA CHAPTER OFFICER WORKSHOP 2011

JULY 26-27, 2011 EDGEWATER HOTEL - MADISON

Get your squad ready for action at this boot camp for chapter success!

Here are your orders for COW 2011:

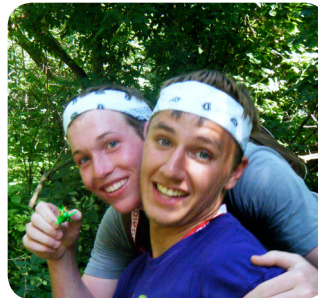
- Fine tune your leadership and communication skills
- Share ideas and best practices with other leaders from across WI
- Learn about WI DECA initiatives and connect to state officers
- Develop a clear strategic plan for 2011 DECA success



COMMENCE FIRING



CEASE FIRING



BAKER



CHARLEY

BE PREPARED FOR FUN AND INTERACTIVE PROGRAMMING.

This is a powerful chapter development experience brought to you by high-energy DECA leadership experts.

YOU DON'T WANT TO MISS THIS EVENT!

DECA BOOT CAMP will put you and your elite squad of DECA forces through the hard-core training challenges needed to ensure your 2011 DECA chapter success.

FOCUS
SPEAKING CONSULTING TRAINING
leadership.focustraining.com

CONFERENCE REGISTRATION

As communicated last year at COW 2010, this specific conference costs were going to increase this year in order to provide the programming our chapters are accustomed to. Housing and conference facilities have changed this year. Due to new policies at UW Madison conference services, it became more cost effective to move the conference to a new facility. Our new facility at The Edgewater is spectacular for this conference! We are so excited that we were able to keep this conference in the heart of Madison. We look forward to your feedback and welcome any questions. Please contact Holly Gregory if you have any questions or comments (262.490.1238 or widecacenterdirector@gmail.com).

Conference Registration is available at: <https://www.decaregistration.com/wi-cow>. **Registration will be open from May 20th through June 20th**. The site will look very familiar to those of you who attended SCDC or ICDC! We will continue to utilize our WI DECA Conference Registration system in 2011-12. If you are a local chapter that will **NOT** be staying at the hotel, contact Holly Gregory **BEFORE** beginning your registration. If you do have any questions, please contact Holly Gregory (262.490.1238 or widecacenterdirector@gmail.com).

Registration Cost

- **\$105.00 Chapter Officer Delegate**
- **\$55.00 Chapter Advisor**

Housing Cost

- **\$32.50 per Chapter Officer Delegate per night (*based on quad housing)**
- **\$70.00 per Chapter Advisor per night (*based on single occupancy)**

*Invoices will be automatically generated based on this pricing.

If advisors are sharing rooms with co-advisors, your housing will be adjusted and your chapter will be re-invoiced after registration closed on June 20th. If you are the only advisor attending you will receive a single room. You will **not** be paired up with an advisor from another chapter for this conference.

If students will have more than 4 people in a room or less than 4 people in a room, your chapter will be re-invoiced the adjusted amount after registration closes on June 20th. (Room cost is \$70 for the first person in the room per night and \$20 for each additional person per night to help you figure correct room cost before being re-invoiced. Your students will **not** be combined with students from other chapters for this conference.

There are a limited number of rooms that will house 6 people. Chapters that have exactly 6 (same gender) Chapter Officers may be placed in one of these rooms.

There are a limited number of suites for Advisors. These rooms are ideal for Chapter Planning time. They will be assigned on a first registered /first served basis. These suites are two room suites and could accommodate more than one advisor as well.

TENTATIVE CONFERENCE AGENDA

Based on feedback from COW surveys over the last few years, structure of this event has shifted slightly to accommodate more individual chapter strategic planning time. Please review the tentative agenda below to make your own strategic plan for your COW experience!

Tuesday	Group A	Group B
Lunch On Your Own/Chapter Strategic Plan Time		
11:00am-1:00pm	Conference Registration	
1:00pm-3:00pm	Opening Session	
2:00pm-3:00pm	Advisor Meeting	
3:00pm-3:30pm	Hotel Check In	
3:30pm-5:30pm	Group A Breakout Session	Group B Breakout Session
4:00pm-5:00pm	Advisor Meeting	
5:30 -6:30 pm	Group Dinner ~ Edgewater	
7:00-8:00 pm	<ul style="list-style-type: none"> ■ Officer Success Panel Discussions ■ President/VP ■ PR/Community Relations ■ Financial/School Store 	
8:00 – 9:00 pm	Second General Session	
	<ul style="list-style-type: none"> ■ Re-Energize ■ State Officer Goal Sharing/Initiatives 	
9:00 –11:30 pm	Chapter Strategic Plan Time	
Wednesday	Group A	Group B
7:00am-8:30am	Breakfast On Your Own	
9:00 am – 12:00 pm	<i>FOCUS Activity</i>	<ul style="list-style-type: none"> ■ Chapter Management ■ Strategic Planning ■ State Officer Workshops ■ Promotion
12:00pm-1:30pm	Lunch On Your Own	
1:30 – 4:30 pm	<ul style="list-style-type: none"> ■ Chapter Management ■ Strategic Planning ■ State Officer Workshops ■ Promotion 	<i>FOCUS Activity</i>
5:00-8:00 pm	Focus Activity Finale/Picnic ~ Warner Park, Madison	
8:00-11:00 pm	Individual Chapter Strategic Plan Time	
Thursday	Hotel Check Out by 11am	

ADVISOR INFORMATION

Conference Location

The Edgewater Hotel
666 Wisconsin Avenue
Madison, Wisconsin 53703
Map to hotel: <http://www.theedgewater.com/location.html>

Codes of Conduct

Codes of conduct are included in the packet for your convenience. Please use these forms as they are conference specific. Copies of Codes of Conduct for each attendee and advisors should be mailed, faxed or emailed to Holly Gregory by **June 20th, 2011**. Advisors are required to bring originals to the conference for their reference. *Please fill out FOCUS Consent Form and bring with you to conference.*

1080 Lowell Drive
Oconomowoc, WI 53066
Phone: 262.490.1238
FAX: 262.354.0406
Email: widecacenterdirector@gmail.com

FOCUS Training Activity

FOCUS Training will facilitate an exciting interactive program for your officers. Come prepared for “activity” by bringing the following items:

- **Comfortable, Team spirited clothing**
- **Sunscreen**
- **Tennis Shoes**
- **Water Bottle**
- **Rain Gear**
- **Positive Attitude**
- **Team Spirit**

Advisors should plan to be involved in the activity!



“When placed in command...take charge.” ~ General Norman Schwarzkopf



2011 Chapter Officer Workshop Student Delegate Code of Conduct

The DECA State Office requires EACH delegate attending any DECA Conference or Workshop to read and sign a copy of this form and return it with conference registration materials. It is recommended that each local advisor review this form with chapter members so that there is no misunderstanding of the rules, regulations, and responsibilities of the conference participants.

1. The term “delegate” shall mean any DECA member attending the workshop.
2. There shall be no defacing of public property. Any damages to any property or furnishings in the hotel rooms or buildings or in the conference center must be paid by the individual or chapter responsible. Local chapters will be billed directly by the dorm or conference center for any damages.
3. Delegates shall keep their advisors informed of their activities and whereabouts AT ALL TIMES. **Each local advisor should establish a policy with his/her students prior to the workshop in order to meet this regulation.**
4. Delegates should be prompt and prepared for all activities. Delegates should be financially prepared for all possibilities.
5. Boom boxes and other large and loud music machines are not allowed at the workshop. Delegates may use “walkabouts” and other small music machines with individual earphones.
6. Delegates shall stay in designated housing, not with friends or relatives.
7. Only registered delegates and official workshop guests are to be at the workshop and dorm.
8. Room doors must be kept **open wide** at all times when members of the opposite sex are visiting.
9. No alcoholic beverages or controlled substances, narcotics, etc., in any form shall be possessed or consumed by delegates at any time, under any circumstances.
10. No use of tobacco will be permitted at the workshop, or in public facilities or private facilities in accordance with the new state law that prohibits use by minors.
11. Delegates shall not use their own cars or ride in cars belonging to others unless accompanied by an adult advisor. No delegate shall leave the dorm grounds unless accompanied or given permission by their chapter advisor.
12. Delegates are required to attend all workshop activities.
13. Identification badges will be worn at all times.
14. Casual attire is permitted at this workshop.
15. Chapter advisors will be responsible for the supervision of their student delegates.
16. All delegates must honor workshop curfew as published in the registration packet. Curfew is defined as being quiet in your own room.
17. Delegates agree to conduct themselves in a professional and ethical manner at all times and follow the directives of official workshop staff, other adult supervisors and dorm staff.
18. The student delegate will also be responsible for following all local school rules of conduct.
19. Delegates violating or ignoring any of the conduct rules may be sent home immediately at their own expense. Parents, school officials, and the state advisor will be notified.



Student delegate agrees to:

I have read and fully understand the DECA Student Delegate Conduct and Procedures and agree to comply with these guidelines. I understand the necessity of these rules for the success of the workshop. Furthermore, I am aware of the consequences that will result from violations of any of these regulations.

(If over 18), I grant WI DECA the right to use, reproduce, assign and/or distribute photographs, videotapes, and sound recordings of me in the materials they or their agents may create.

Delegate Name (Print clearly)	Chapter Name (Print clearly)
Delegate Signature	Advisor Signature
Principal Signature	

Parent/Guardian agrees to:

I have read and agree to abide by the DECA Conduct Practices and Procedures. We also agree that the school officials, the chapter advisors, and the state DECA staff have the right to send my son/daughter home from the activity at my expense if he/she has violated the Code of Conduct and/or his/her conduct has become a detriment.

I also authorize the advisor to secure the services of a physician or hospital and to incur the expenses for necessary services in the event of accident or illness, and I will provide for the payment of these costs.

Insurance Company Name	Policy Number
------------------------	---------------

Parent/Guardian agrees to

I HEREBY CONSENT to release the Department of Public Instruction from liability in the event of injury to the above named student. This consent is valid with the exception of deliberate violation of the student's constitutional rights or damage committed or injury incurred as a direct result of DPI employees not acting within the scope of their employment.

I HEREBY GRANT PERMISSION to WI DECA the right to use, reproduce, and assign and/or distribute photographs, videotapes, and sound recordings of the above named student in the materials they or their agents may create.

Parent or Guardian Signature	
Address	
Phone Number (Evening)	Phone Number (Daytime)



Chapter Officers Workshop Local Advisor Code of Conduct
Due June 20th, 2011 to Holly Gregory

WIDECA requires EACH local advisor and chaperone attending the COW to read and sign a copy of this form. Send copies of this form and the student forms to Holly Gregory by June 20th, 2011.

1. Local advisors are responsible for discussing the Student Delegate Conduct Practices and Procedures form with all students attending the Chapter Officers Workshop so that all students thoroughly understand their responsibilities as delegates.
2. Local advisors are responsible for knowing the whereabouts of all their students at all times. Each local advisor should establish a policy with his/her students prior to the workshop in order to meet this regulation.
3. Advisors must have with them at the workshop a list of their students, as well as home telephone numbers and parent's or guardian's names.
4. Curfew will be enforced. Local advisors are responsible for room checks to ensure their students are in their assigned rooms.
5. No use of tobacco will be permitted at the Chapter Officers Workshop. Delegates under 18 are prohibited from using tobacco products at any time per new Wisconsin State Law.
6. Identification badges will be worn at all times.
7. Chapter advisors are responsible for supervision of their delegates' conduct and shall be available to their students at all times.
8. All advisors and chaperones shall refrain from the consumption of alcoholic beverages at any time during a state, regional, or national sponsored DECA activity where students are in attendance.
9. No advisor or chaperone can leave the grounds and/or workshop facilities without signing out with a state advisor. If an advisor or chaperone must leave for other than emergency situations, it should be for a brief time.
10. The local principal and/or designated administrator will be contacted in emergency situations if the local advisor cannot be located within a reasonable amount of time or is unable to give proper amount of supervision. Student emergencies include: accidents, possession of drugs or alcohol, breaking conference rules, family emergencies, and any other situation designated as an emergency.

"I have read and fully understand the WDECA Chapter Officers Workshop Local Advisor and Chaperone Procedures and Responsibilities and agree to comply with these guidelines."

Advisor/Chaperone Signature	Principal Signature
Chapter Name	Advisor Cell Phone:

In case of emergency the following local administrators should be contacted:

1 st Contact Name/Title	2 nd Contact Name/Title
Day/Evening Phone	Day/Evening Phone

Disclosure:

A FOCUS Training workshop involves a variety of activities that often include warm-ups, leadership skills activities, group initiative problems, low ropes course elements, and other physical adventure activities. The level of participation in a FOCUS Training workshop is at all times completely up to the participant's choice. Although our staff is comprised of trained facilitators, there is a potential risk. Each participant must assume any risk of injury.

Certain health/medical information must be made known to the facilitators conducting the workshop, so that they are prepared to respond appropriately if the need arises. This information will be held in confidence. Please complete the form and return it to FOCUS Training prior to participating in any activity.

Participant Information:

Group Name: _____ Participant's Name: _____

Do you have any limiting physical disabilities or handicaps (temporary or permanent)?

___ yes ___ no If yes, explain: _____

Are you currently under a physician's care for any condition?

___ yes ___ no If yes, explain: _____

Are you currently taking any medication (prescribed or otherwise: e.g. cold medicine)?

___ yes ___ no If yes, explain: _____

Do you have any allergies, reactions to medications, or other medical limitations?

___ yes ___ no If yes, explain: _____

Informed Consent:

I understand that parts of the FOCUS Training workshop may be physically and emotionally demanding. I affirm that my health is good and that I am not under a physician's care for any undisclosed condition that bears upon my fitness to participate in FOCUS Training activities. I recognize the inherent risk of injury or disability in FOCUS Training activities. I understand that each participant must assume the risk of injury that could result from any of these activities. I release the entity that is offering the program, its staff members and Board of Directors, from all liability of any injury to me from participation in the FOCUS Training workshop.

Participant's (Parent/Guardian) Signature: _____

Date: _____ Participant Address: _____

In the event of injury or illness, please indicate an emergency contact:

Name & Relationship: _____

Home Phone: _____ Work Phone: _____

Photo / Media Release:

I grant FOCUS Training the right to use, reproduce, assign and / or distribute photographs, videotapes and sound recordings of me in the materials they or their agents may create.

Name (print): _____ Signature: _____ Parent/Guardian (If under 18) _____