SLC Student Delegate Code of Conduct Form

SLC Student Delegate Code of Conduct

It is required of EACH student attending the SLC to read and sign a copy of this form. It is recommended that each local adviser review this form with the entire chapter so that there is no misunderstanding of the rules, regulations and responsibilities of the conference participants. **The local adviser must submit this form for each student attending by the first Wednesday in March to the State Office.**

1. The term “delegate” shall mean any FBLA member attending the conference.
2. There shall be no defacing of public property. Any damages to 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 hotel or conference center for any damages.
3. Delegates shall keep their advisers informed of their activities and whereabouts AT ALL TIMES. (Each local adviser should establish a policy with his/her students prior to the conference in order to meet this regulation).
4. Delegates should be prompt and prepared for all activities.
5. Delegates should be financially prepared for all possibilities.
6. Delegates shall stay in designated housing, not with friends or relatives. Chapters registered as day guests are exempt from this regulation.
7. Hotel room doors must be kept open wide at all times when members of the opposite sex are visiting.
8. No alcoholic beverages or controlled substances, narcotics, etc., in any form shall be possessed or consumed by delegates at any time, under any circumstances.
9. No use of tobacco will be permitted at the general sessions, banquet, competitive events, tours, special interest sectionals or in public facilities.
10. Delegates shall not use their own cars or ride in cars belonging to others unless accompanied by an adult adviser.
11. Delegates are REQUIRED to attend delegate assemblies and business meetings; however, voting delegates are REQUIRED to attend delegate assemblies, voting sessions and business meetings.
12. Nametags shall be worn at all conference events.
13. Delegates agree to conduct themselves in a professional and ethical manner at all times and follow the directives of official conference staff, other adult supervisors and hotel staff.
14. Delegates violating or ignoring any of the conduct rules may be sent home immediately at their own expense. Parents, school officials and the State Office will be notified.
15. Delegates violating or ignoring any of the conduct rules will subject their entire delegation to being unseated and their candidates or competitive event participants from being disqualified.
16. All delegates must honor conference curfew. Curfew is 12:00 Midnight. Curfew is defined as “all delegates in assigned room - lights out.”
17. The student delegate will also be responsible for following all local school rules of conduct.
18. The dress code approved by the national and/or state office will be adhered to at all times during the State Leadership Conference.

I have read and fully understand all 18 points of the FBLA State Leadership Conference STUDENT DELEGATE CONDUCT PRACTICES AND PROCEDURES form and agree to comply with these guidelines. I understand the necessity of these rules for the success of the conference. Furthermore, I am aware of the consequences that will result from violation of any of the regulations.

Student Name (Please Print)	Birthdate
Address (Street, City, State, Zip)	Home Phone Number (Area/No.) ( ) -

Delegate's Signature	Adviser's Signature Adviser's Printed Name
Principal's Signature Principal's Printed Name	Chapter Name
School Phone Number (Area/No.) ( ) -	Grade Level

To the Parent/Guardian:

I have read and agree to abide by the FBLA State Leadership Conference Student Delegate Conduct Practices and Procedures. I also agree that the school officials, the chapter advisers and the State Office staff have the right to send my son or daughter home from the activity at my expense if he/she has violated the Code of Conduct and/or his or her conduct has become a detriment.

I also authorize the adviser 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 or Guardian's Signature Parent's Printed Name	
Address (Street, City, State, Zip)	
Daytime Phone Number (Area/No.) (Evening) ( ) -	**Evening** Phone Number (Area/No.) ( ) -

Note: Advisers must submit copy of this form for each student delegate attending the SLC. Forms must be received via mail by the first Wednesday in March at the State Office.