

SkillsUSA Texas District 04 Leadership and Skills Conference

2/26/2016 - 2/27/2016

CONFERENCE REGISTRATION, PERSONAL AND LIABILITY RELEASE FORM

Read the other side of this form. Then, complete (Inc entire form. Type or print clearly.

- Participants must wear their name badge at all times during the conference.
- They should also carry a copy of their medical insurance card at all times.

1 Complete this entire section.

Participant's home address, is required. Do not use school address as home address.

Email address is required. Pre-Conference information will be sent electronically.

SkillsUSA State Association: Texas			Parents'/Guardians' Names:		
Division: High School			Parents' Telephone Number (area code required):		
Participant's Name (First, Last) as it should appear on name Badge:			Name of SkillsUSA Advisor for participant's occupational area:		
Participant's Home Address:			School where participant's occupational training/trade area is taught:		
City:	State:	Zip Code:	Mailing Address of above school:		
Home Telephone (area code required):	Cell Phone (area code required):		City:	State:	Zip Code:
Age:	Date of Birth (MM/DD/YY):	Check One: Male Female	School Telephone Number (area code required):		
Email address (to receive important instructions/contest updates before conference):			Participant's T-shirt Size: S M L XL 2XL 3XL		

2 Registration Type:

Contestant	Contest Name in which competing:
Graduation Year:	
Occupational Training/Trace Area in which contestant is enrolled:	

3 Complete this on-site emergency contact/ADA information.

Name of Teacher/Adult chaperoning participant at conference:	Check "Yes" if participant has a disability that meets criteria specified in the Americans with Disabilities Act (ADA). We will contact you for further information. <input type="checkbox"/>
On-site Telephone Number of teacher/adult chaperone (area code required):	

4 Check the appropriate box to signify the participant's agreement.

I have read and completely understand the Personal Liability and Medical Release Form, Code of Conduct, the Release of Personal Information Through Lead Retrieval System statement, and the Photography and Sound Release agreement, and, by checking the box, do hereby agree to abide by these in their entirety, accept the conditions of the agreements, and completely release SkillsUSA's national and state associations.

PARTICIPANTS - CHECK HERE IF YOU ARE OVER AGE 18 AND ATTEST:

I have read completely and understand the Personal Liability and Medical Release Form, the code of conduct, the Release of Personal Information Through Lead Retrieval System statement, and the Photography and Sound Release agreement, and by checking the box, do hereby agree to abide by these in their entirety, except the conditions of the agreements, and completely release SkillsUSA's national and state associations. I have provided all necessary medical information to the adult chaperoning my child at this event so that this person may act on my behalf in case of medical emergency.

Parent/GUARDIAN - CHECK HERE TO ATTEST FOR PARTICIPANT (Mandatory if participant is under age 18)

SkillsUSA Texas Personal Liability & Code of Conduct

Event Name

Location

Dates

I hereby agree to release SkillsUSA Texas Association Inc., its representatives, agents, servants and employees from liability for any injury to the named person, resulting from any cause whatsoever occurring to the named person at any time while attending the above noted event. Including travel to and from the event, excepting only such injury or damage resulting from willful acts of representatives, agents, servants and employees. I voluntarily assume all risk and danger relating to the event, whether occurring prior to, during or after the event. I do voluntarily authorize the SkillsUSA Texas representative of medical services coordinator, assistants and/or designees to administer and/or obtain routine or emergency diagnostic procedures and/or routine or emergency medical treatment for the named person as deemed necessary in medical judgment. Parents/guardians of participant will allow **emergency medical treatment** to be administered as needed. Any further treatment will require parental/guardian consultation. I agree to indemnify and hold harmless SkillsUSA Texas and its district associations and said medical services coordinator and/or assistants and designees for any and all claims, demands, actions, rights of action, and/or judgments by or on behalf of the named person arising from or on account of said procedures and/or treatment rendered in good faith and according to accepted medical standards. Having read and understood completely the "Code of Conduct" of SkillsUSA Texas Association Inc., I do hereby agree to follow the procedures and practices described. I fully understand that this is an educational activity and will, to the best of my ability, apply myself for the purpose of learning and will uphold at all times the finest qualities of a person representing SkillsUSA.

NOTE: All persons under legal age must have a parent or guardian sign this form. If you are age 18 or older, please indicate that on other side of this form. Otherwise, this form will be returned for parent/guardian approval. All participants must check this form.

PARTICIPANTS: Be sure you understand the "Code of Conduct." Any persons violating these rules may be sent home at their own expense, may cause other contestants from their chapter to be sent home, or may otherwise disqualify their local chapter from participating in the before noted event.

I have read and completely understand the Personal Liability and Medical Release Form, the Code of Conduct, and Photography and Sound Release agreements, and, by signing this document, I do hereby agree to abide by these in their entirety, accept the conditions of the agreements, and completely release SkillsUSA's national and state associations. Parent or Guardian required if participant is under 18 years of age.

Participant Signature _____ Date _____

Parents or Guardian Signature _____ Date _____

This form should be presented to your district director at the time of registration. You should have a copy with you at all time.

Code of Conduct Agreement

This event is designed to be educational functions, and all plans are made with that objective. SkillsUSA Texas wants every person to have an enjoyable experience with every attention paid to safety and comfort. All participants will be expected to conduct themselves in a manner best representing the nation's greatest student organization. In order that everyone may receive the maximum benefits from participation, the "Code of Conduct," as established by SkillsUSA's Texas board of directors, must be followed at all times. **Note** that attendance is not mandatory. By voluntarily participating, you agree to follow the official event rules and regulations or forfeit your personal rights to participate. SkillsUSA is proud of its students and knows that by signing this "Code of Conduct" you are simply reaffirming your dedication to be the best possible representative of your state.

1.I will, at all times, respect all public and private property, including the hotel/ motel in which I am housed.

2.I will spend each night in the room of the hotel/motel to which I am assigned.

3.I will strictly abide by the curfew established and shall respect the rights of others by being as quiet as possible after curfew.

4.I will not enter in the sleeping room of the opposite gender unless my advisor is present and the door is completely open at all times.

5.I will not use alcoholic beverages.

6.I will not use drugs unless I have been ordered to take certain prescription medications by a licensed physician. If I am required to take medication, I will, at all times, have the orders of the physician on my person.

7.My conduct shall be exemplary at all times.

8.I will keep my advisor informed of my whereabouts at all times.

9.I will, when required, wear my official identification badge.

10. I will respect official SkillsUSA attire by not using any tobacco product while in official dress.

11. I will attend, and be on time for, all general sessions and activities registered.

12. I will adhere to the dress code at all required times.

Violations and Penalties

I agree that if, for any reason, I am in violation of any of the rules of the conference, I may be brought before the appropriate disciplinary committee for an analysis of the violation. I also agree to accept the penalty imposed on me. I understand that any penalty and reasons for it will be explained to me before it is carried out. I further realize that the severity of the penalty may increase with the severity of the violation, even to the extent of being immediately sent home at my own expense.

1. Violations of Items 1 through 6 of the "Code of Conduct" will be grounds for immediate removal from office and relinquishment of awards and recognition. In addition, the violator will be sent home at his or her own expense. Notification of the violation and the action taken will be sent to the participant's school district and parents or guardians. The participants from the participant's school could be disqualified as well.

2. Violations of Items 7 through 12 will result in a warning and reprimand. Notification of the violation and the action taken will be sent to the participant's school and parents or guardians. Repeated violations of Items 7 through 12 may result in the participant being sent home at his/her own expense. It is within the spirit of being a proud and meaningful member of SkillsUSA that I agree to these rules of conduct by signing my name on this page.

Photography & Sound Release

By my attendance at the event noted, I hereby grant the SkillsUSA Texas Association permission to make still or motion pictures and sound recordings, separately or in combination, and also give a production company approved by the SkillsUSA Texas Association permission to use the finished silent or sound pictures, and/or sound recordings as deemed necessary. Further, I so hereby relinquish to the SkillsUSA Texas Association all rights, title, interest in, and income from the finished sound or silent motion pictures, still pictures, and/or sound recordings, negatives, prints, reproductions and copies of the originals, negatives, recording duplicates and prints, and further grant the SkillsUSA Texas Association the right to give, sell, transfer and/or exhibit the same to any individual, business firm, publication, television station, radio station or network, or governmental agency, or to any of their assignees, without payment or other consideration to me. My agreement to perform under camera, lighting and stated conditions is voluntary, and I do hereby waive all personal claims, causes of action, or damages against the SkillsUSA national headquarters and the employees thereof, arising from a performance or appearance.

Audio- or videotaping of conference speakers is not permitted