

Washington State Future Business Leaders of America



**Anaheim, California 2009
National Leadership Conference
Travel Package Information**

Washington State FBLA National Leadership Conference 2009 Travel Package Information

CONGRATULATIONS!

Attending the FBLA-PBL National Leadership Conference is an experience that less than 2% of all members in the world get a chance to experience. It's unbelievable. It's exciting. It's where the best of the best in FBLA-PBL assemble. We are excited to have you joining us!

WASHINGTON STATE FBLA TRAVEL PACKAGE OVERVIEW

The Washington State FBLA NLC 2009 Travel Package is a complimentary service of Washington State FBLA. This package is offered in order to maximize the NLC experience as a united state delegation. The 2009 travel package is once again a land-only package.

Travel Package Includes:

- 6 nights lodging at a conference hotel
- NLC conference registration
- Registration insurance
- State trading pins
- Spirit items
- Washington State FBLA polo shirt

General Information:

June 23, 2009:	Arrive in Anaheim
June 24, 2009:	Institute for Leaders or free day for touring
June 25-28, 2009:	National Leadership Conference general sessions, workshops, competitive events, open events, activities, and touring
June 29, 2009:	Return home

On-site NLC coordination for the 2009 National Leadership Conference in Anaheim will be managed by Washington State FBLA. Washington State FBLA is not a travel agency. Because the package rate includes a set number of nights, no flexibility exists for deviation from this group conference package. Washington State FBLA has worked hard to secure adequate lodging and to arrange activity options that will be educational and entertaining during the conference. Individual chapters are welcome to arrive early/stay beyond the timeframe of the conference, but all housing arrangements will be the responsibility of the individual chapter until the group arrival date. The **ONLY** way for Washington State FBLA members and advisers to stay in the conference hotel is by participating in the state travel package.

Washington consistently displays an incredible amount of comradery and team spirit at the national event; and by staying together, we ensure a higher level of safety & security for all.

All materials for the National Leadership Conference as well as any questions or comments should be addressed to:

FORM RECEIPT DEADLINE: MAY 1, 2009
50% DEPOSIT RECEIPT DEADLINE (PO Acceptable for deposit only, Payment Preferred): MAY 15, 2009
FINAL PAYMENT RECEIPT DEADLINE (PAYMENT, NOT PO): JUNE 10, 2009

Washington State FBLA
National Leadership Conference 2009 Travel Package Information

Washington State Future Business Leaders of America

NLC@wafbla.org

1445 Galaxy Drive NE, Suite 302

Lacey, WA 98516

Phone 360.753.5666, FAX 360.570.8643

FORM RECEIPT DEADLINE: MAY 1, 2009
50% DEPOSIT RECEIPT DEADLINE (PO Acceptable for deposit only, Payment Preferred): MAY 15, 2009
FINAL PAYMENT RECEIPT DEADLINE (PAYMENT, NOT PO): JUNE 10, 2009

**Washington State FBLA
National Leadership Conference 2009 Travel Package Information**

**School & Financial Information Form
FILL OUT ONE FORM PER SCHOOL**

School Information:

School Name:	Lead Adviser Contact Name:
School Phone:	Home Phone:
School FAX:	E-Mail Address:
Traveling Adviser/Chaperone:	Traveling Adviser/Chaperone Phone:
Traveling Chaperone Address:	City, State, ZIP:
School Bookkeeper:	Bookkeeper Phone:
Bookkeeper Address:	Bookkeeper FAX:
Bookkeeper City/State/ZIP:	

Package (per person):	Price:	Quantity	Amount Due:
Quad	\$539		
Triple	\$639		
Double	\$799		
Single	\$1359		
Institute for Leaders (Student)	\$115		
Institute for Leaders (Advisers)	\$50		
Disney Twilight Ticket (valid for entry after 4 p.m., not available at gate)	\$40		
Disney 1 Day 1 Park Ticket (Gate \$69)	\$62		
Disney 1 Day Park Hopper (Gate \$94)	\$83		
Disney 3 Day Park Hopper (Gate \$199)	\$159		
Disney 5 Day Park Hopper (Gate \$244)	\$179		
GRAND TOTAL:			
Subtract Travel Scholarships (and note below)			
ADJUSTED TOTAL:			
50% of GRAND TOTAL (deposit due 5/15/08)			
50% of GRAND TOTAL (final payment due 6/10/08)			

FORM RECEIPT DEADLINE: MAY 1, 2009
50% DEPOSIT RECEIPT DEADLINE (PO Acceptable for deposit only, Payment Preferred): MAY 15, 2009
FINAL PAYMENT RECEIPT DEADLINE (PAYMENT, NOT PO): JUNE 10, 2009

**Washington State FBLA
National Leadership Conference 2009 Travel Package Information**

**Traveler Information Form
FILL OUT ONE FORM PER TRAVELER**

Traveler Information:

Traveler Name:	Parent/Guardain Name:
Traveler Type (check the two appropriate boxes): <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Student <input type="checkbox"/> Adviser/Chaperone	
Home Phone:	E-Mail Address:
Home Address:	City/State/Zip:
Emergency Contact Name:	Emergency Contact Phone Number:

Package Options & Information:

Room Type (Single, Double, Triple, Quad)*:	Roommate REQUESTS**
Shirt Size:	

If you would like to add the Institute for Leaders, please complete the following:

Track Selection:	Initials verifying you would like to add the \$115 IFL option to your package

* Students are required to stay in a quad room UNLESS they have found specific roommates and every occupant of the room agrees to pay the higher cost.

** Please note that every effort will be made to accommodate roommate requests, but they are not guaranteed.

FORM RECEIPT DEADLINE: MAY 1, 2009
 50% DEPOSIT RECEIPT DEADLINE (PO Acceptable for deposit only, Payment Preferred): MAY 15, 2009
 FINAL PAYMENT RECEIPT DEADLINE (PAYMENT, NOT PO): JUNE 10, 2009

Washington State FBLA
National Leadership Conference 2009 Travel Package Information

NLC Materials Checklist Form
FILL OUT ONE FORM PER SCHOOL

Complete?	Task/Form:
	Fill out ONE School & Financial Information Form for your school.
	Fill out ONE traveler information form for every person attending the NLC.
	Get signed copies of the Emergency Medical Treatment form and Code of Conduct from each student and include a copy of these forms with your materials.
	Start the payment process! A 50% deposit is due on or before May 15, 2009. Final payment is due by June 10, 2009. <i>A PO does not constitute payment of the final amount due.</i>

Send completed NLC materials to:

Washington State FBLA
NLC Materials
1445 Galaxy Drive NE, Suite 302
Lacey, WA 98516

360.753.5666
FAX 360.570.8643

NLC@wafbla.org

FORM RECEIPT DEADLINE: MAY 1, 2009
50% DEPOSIT RECEIPT DEADLINE (PO Acceptable for deposit only, Payment Preferred): MAY 15, 2009
FINAL PAYMENT RECEIPT DEADLINE (PAYMENT, NOT PO): JUNE 10, 2009

Washington State FBLA National Leadership Conference 2009 Travel Package Information

WASHINGTON STATE FUTURE BUSINESS LEADERS OF AMERICA CODE OF CONDUCT

FBLA, as an integral part of the Business Education program in Washington, offers training to students with career objectives in business and office occupations and business-related courses. Professional conduct and appearance of each individual pervades all training. Therefore, all persons are responsible for adhering to this code of conduct from the time they leave home until they return home.

Attendance at any FBLA-sponsored activity is a special privilege. Recognizing that an organization is judged largely by the behavior of its individual participants, the following Code of Conduct is required for members, guests, and advisers who attend the regional, state, and national leadership conferences of Future Business Leaders of America. If a conduct violation occurs, regardless of when exposed, that student(s) may not be able to attend any other regional, state, or national conference during that school year. These rules will be strictly enforced.

1. The term "delegate" shall be any person attending the conference. Delegates shall wear their conference name badges at all times on site.
2. All delegates shall behave in a professional, courteous and respectful manner, refraining from language and actions that might bring discredit upon themselves, their school, their home, their friends, the conference, or the FBLA organization.
3. Because delegates are guests using the facilities, special care will be taken not to deface or destroy any property. Any damages to any property or furnishings in the hotel rooms or buildings will be paid by the individual.
4. Student delegates shall 1) keep their adult adviser(s) informed of their activities and whereabouts at all times; 2) not use their own cars or ride in cars belonging to others during the conference unless accompanied by an authorized adviser/chaperone, or unless granted written permission by parent/legal guardian, accompanying adviser, and school authority; 3) not engage in activities with non-conference individuals; 4) not enter public dance halls, bars, or night clubs.
5. NO ALCOHOLIC BEVERAGES, TOBACCO PRODUCTS, OR ILLEGAL SUBSTANCES IN ANY FORM, OR THAT WHICH PURPORTS TO BE, shall be possessed or used at any time or under any circumstances on private or public properties.
6. Curfew regulations shall be interpreted to mean that each student delegate shall be in his/her room at the time stated in conference materials or by State FBLA Adviser or Chair. Conference participants not staying at the hotel shall be off conference facilities by curfew.
7. All delegates shall be registered and shall attend workshops, regional meetings, scheduled business sessions, and other activities for which they are registered.
8. Dress regulations, appropriate to specific situations, shall be established by the FBLA Board of Directors. Dress code will be followed (see conference registration packet). Delegates and advisers attending FBLA functions shall follow dress regulations while on site. Exceptions will be determined by the State Adviser or State Chair.
9. School district policy shall be in effect for local adviser/adult ratio during all Washington State FBLA activities. If the district does not have a policy, a ratio of 10 students to 1 local adviser/adult will be in effect for overnight travel within Washington State. For in-state travel when an overnight stay is not required, a ratio of 15 students to 1 local adviser/adult is the rule. A ratio of 8 students to 1 local adviser/adult will be in effect for out-of-state travel.
10. It is agreed that violation of the Code of Conduct is cause for the appropriate FBLA authorities to require the violators to vacate hotel rooms and withdraw from conference activities. Serious misconduct will be reported to the principal and/or other authorities. PARENTS, under these circumstances you will be notified that your child is being sent home at your expense, and it is your responsibility to make arrangements to pick up your child.
11. Anyone being in the willful companionship of another person violating FBLA Code of Conduct will also be subject to disciplinary action.

FORM RECEIPT DEADLINE: MAY 1, 2009

50% DEPOSIT RECEIPT DEADLINE (PO Acceptable for deposit only, Payment Preferred): MAY 15, 2009

FINAL PAYMENT RECEIPT DEADLINE (PAYMENT, NOT PQ): JUNE 10, 2009

CONSEQUENCES OF VIOLATION OF CODE OF CONDUCT

1. USE OR POSSESSION OF ALCOHOL, TOBACCO PRODUCTS, AND ILLEGAL SUBSTANCES OR THAT WHICH PURPORTS TO BE

Student sent home. A student who is present when use or possession occurs is subject to the same consequence.
Parent, school, and local authorities notified.
Disqualification from conference and award. State officer removal from office.

2. CURFEW

Students are expected to be in their own rooms at curfew. Local advisers will be contacted if there is a curfew violation, and students will be dealt with accordingly. If special circumstances warrant being outside the room, **written** permission from the adviser/chaperone must be in possession of the student.

3. MISDEMEANORS AND FELONIES

These include, but are not limited, to stealing, shoplifting, vandalism, including pulling emergency alarms.

Student is sent home.
Disqualification from conference and award. State officer removal from office.
Parent, school, and local authorities notified.

4. CHEATING

If an adviser has direct awareness of cheating by a student, the information is made known to FBLA State Adviser or State Chair immediately.
Disqualification from events/awards. State officer removal from office.
Parent, school, and local adviser notified.

I HAVE READ THE WASHINGTON STATE FBLA CODE OF CONDUCT AND AM WILLING TO ABIDE BY ITS PROVISIONS. IN THE EVENT OF A VIOLATION, I AGREE THAT THE SCHOOL OFFICIAL(S), THE FBLA CHAPTER ADVISER(S), THE FBLA BOARD OF DIRECTORS, OR THE STATE FBLA STAFF HAVE THE RIGHT TO SEND THE STUDENT NAMED BELOW HOME FROM THE ACTIVITY AT PARENT/GUARDIAN EXPENSE, PROVIDED THAT PARENT/GUARDIAN CONTACT HAS BEEN MADE.

I AGREE TO ADHERE TO THE FBLA DRESS CODE AND SUPPORT ITS ENFORCEMENT.

I UNDERSTAND THAT THERE ARE INHERENT DANGERS INVOLVED FOR MY CHILD AS A RESULT OF PARTICIPATION IN THE FBLA-SPONSORED EVENT. MY SIGNATURE ACKNOWLEDGES MY PERMISSION FOR MY CHILD TO PARTICIPATE.

STUDENT NAME _____ DATE _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____

LOCAL ADVISER SIGNATURE _____ DATE _____

SCHOOL ADMINISTRATOR SIGNATURE _____ DATE _____

FORM RECEIPT DEADLINE: MAY 1, 2009
50% DEPOSIT RECEIPT DEADLINE (PO Acceptable for deposit only, Payment Preferred): MAY 15, 2009
FINAL PAYMENT RECEIPT DEADLINE (PAYMENT, NOT PO): JUNE 10, 2009

WASHINGTON STATE FUTURE BUSINESS LEADERS OF AMERICA EMERGENCY MEDICAL TREATMENT AUTHORIZATION

Name of Student _____

Home Address _____ Phone _____

_____ Date of Birth _____

Name of School _____

Name of Activity and Location _____

Date(s) of Activity _____

Adviser/Chaperone _____

This is to certify that _____ has my permission to attend the above-named FBLA activity. I have read the FBLA Code of Conduct and am in agreement with that Code and its consequences. I also hereby absolve and release Washington State FBLA from any claims for personal injuries which might be sustained by the above-named student while he/she is enroute to or from any FBLA-sponsored activity.

AND

In the event of accident or illness, I authorize the above adviser/chaperone or State FBLA staff to secure services of medical personnel and/or hospital if necessary. I accept responsibility for payment of these expenses.

Parent/Guardian Signature _____ Phone _____

Date _____

Alternate Contact Person _____ Phone _____

MEDICAL INFORMATION

Known allergies (drug and natural) _____

Medication(s) taken _____

Current or pre-existing physical or medical restriction/conditions _____

History of heart condition, diabetes, asthma, epilepsy, rheumatic fever or other (please specify)

Date of last tetanus shot _____

Family doctor _____ Phone _____

INSURANCE INFORMATION

Insurance Company _____

Policy/Group Number _____

FORM RECEIPT DEADLINE: MAY 1, 2009
50% DEPOSIT RECEIPT DEADLINE (PO Acceptable for deposit only, Payment Preferred): MAY 15, 2009
FINAL PAYMENT RECEIPT DEADLINE (PAYMENT, NOT PQ): JUNE 10, 2009