**FCCLA STATE OFFICER TRAVEL FORM**

This should be completed and returned to Whitney Whittecar (director@mtfccla.org) **no later than July 17th** for the July Meeting at the Home2 Suites in Helena, MT on July 26-28, 2020.

**State Officer Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Activity:** July State Officer Meeting

**Location:** Home2 Suites, 3325 N Sanders St, Helena, MT 59602

**Officer Arrival Date:** July 26

**Officer Departure Date:** July 28 or 29

**Chaperones:** Whitney Whittecar, Stacy Aaberg & Chapter Advisers in attendance

Do you have food allergies/dietary concerns? If so, please explain.

What are your transportation arrangements?

Who will be the adult driver of the vehicle?

Will other officers be traveling with you? If so, please name them.

Is the vehicle personal or school owned?

Is your school district aware of these arrangements?

Provide a cell phone number you will have on you at all times.

**Personal Liability Release**   
All persons under legal age must have their parents/guardians agree to and affix signatures to the statement below in order to attend the State and National Leadership Conference of FCCLA and the State Officer Meetings of the Montana Association, or any other official meetings of FCCLA.

The undersigned, being parents or guardians of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a member of the student organization known as FCCLA. Hereby agree to release the State of Montana, FCCLA, its representatives, agents, servants, and employees from liability for any injury resulting from any case whatsoever occurring at any time while said minor is attending a conference or meeting of FCCLA, including travel to and from such meetings.

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Parent or Guardian Signature & Date Parent or Guardian Signature & Date