

Texas FCCLA Officer and Advisor Agreement

Directions: Please read carefully and sign, signifying your willingness to follow all of the rules.

The following agreement must be followed by any person serving as a State or Regional Officer for the Texas Association of Family, Career and Community Leaders of America at any level.

As an officer:

1. I will accept the authority of my advisor and any authorized adult in charge of the FCCLA event.
2. I will attend **all** required meetings for the entire time and will make arrangements to report to my chapter, region or any designated individual(s) on time and ready to participate.
3. I will be courteous at all times and respect the others and the majority decision. This will include other officers, guest speakers, workshop presenters, other participants and our nation's flag.
4. I will adhere to any rules set by the motel/hotel property and respect the rights of other guests of the motel/hotel.
5. I will not purchase, possess or be under the influence of alcohol, tobacco, or illegal drugs at any time. This includes mock cocktails.
6. I will not purchase or have in my possession any kind of fireworks/firearms at any FCCLA event.
7. I will be appropriately dressed and groomed at all FCCLA events in accordance with the professional FCCLA dress code and the school's dress code policy.
8. I will be in my hotel room with the lights out at the designated time set by the state or my advisor (only if the advisor's time is earlier than that set by the state). I will remember that there are other people in the hotel and will not leave my room after curfew.
9. I will not leave the group unaccompanied. I will be with at least 2 – 3 members of the delegation at all times, including in my sleeping room.
10. I will not have members of the opposite sex in my hotel room **at any time** – unless an adult is present.
11. I will not participate in any PDA's (Public Display of Affection)
12. I will be present at the June Officer Training and ONLY under pre-approved circumstances may I be allowed not to attend or miss any part of the training/planning.
13. I understand that my duties as an officer are not over until after Regional/State Conference follow-up has been completed.
14. I will conduct myself, collectively and individually, in good faith while maintaining a high level of ethical and professional behavior.
15. I will utilize opportunities to increase public awareness of Family and Consumer Sciences and FCCLA, and keep informed about developments of the organization.
16. I will use FCCLA resources with scrupulous regard and only for the purpose for which they are intended.
17. I will not post any pictures/graphics/language/updates to any social media account that may jeopardize the image of FCCLA officers, staff and organization as a whole.
18. I understand that any sexual misconduct, regardless of gender, will not be tolerated.

As an advisor:

1. I will be present at the June Officer Training and ONLY under pre-approved circumstances may I be allowed not to attend or miss any part of the training/planning. Advisors are expected to remain with students at all times during committee work and workshops unless a separate advisor activity has been planned by Texas FCCLA.
2. I will attend all meetings with my officer and be present with them at all meetings when an advisor is involved. This includes June Leadership and assisting the officer as needed.
3. I am aware that my officer and I will need to travel to one other region conference, other than my own, and know that Texas FCCLA will cover the cost of hotel for both myself and my officer.
4. I am aware that my officer is responsible for hosting a Fall Leadership Workshop, and I will help secure a potential date and location (with up to 3 other officers) prior to June.
5. I am aware that my officer is required to attend their one day Fall Executive Council Meeting, as well as their Region Leadership Conference and the State Leadership Conference.
6. I understand that my officer's duties are not over until after State Conference follow-up has been completed.
7. I will assist my officer in all of their duties throughout the year, including over-seeing their FCCLA correspondence and holding them accountable to deadlines.
8. I will utilize opportunities to increase public awareness of Family and Consumer Sciences and FCCLA, and keep informed about developments of the organization.
9. Keep administration informed of all meetings and travel, as well as the officer's responsibilities.

Any infraction of the officer rules will not be tolerated and should **ANY** rule be broken, the school and parents will be called and arrangements will be made to send the officer home immediately. If, for any reason, the officer must return home early, any additional cost must be assumed by the parents/guardians. The cost will include total repayment for my attendance at the meeting and the officer will relinquish all officer responsibilities.

FCCLA PHOTO RELEASE FORM

In consideration of _____, I am authorizing staff at the Texas Association, Family, Career and Community Leaders of America (FCCLA) to take and use my picture in various FCCLA promotional materials (to include billboards, brochures, website, etc.). I do not wish to approve the finished version(s) of the photographs before they are used by FCCLA in these promotional materials, nor do I wish to claim any ownership interest in these photographs. I will not consider FCCLA's use of the photographs as libelous or an invasion of my privacy. I am over the age of 18 and qualified to make this release, which I intend to be binding on my legal representatives, heirs, successors, and assigns.

Name (please print)

Candidate Signature

School Name

Region

Chapter Advisor Signature

Parent Signature

Principal Signature

FAMILY, CAREER AND COMMUNITY LEADERS OF AMERICA REGION OFFICER CONSENT AND RELEASE FORM

We, the undersigned parents/guardians, desire that our child, _____, shall have the opportunity to participate in the following meetings and events for regional officers sponsored by the Texas Association, Family, Career and Community Leaders of America:

all meetings and events planned and carried out during the 201;/42 school year

Only those events checked below:

- June Leadership Training, June ;/36, 201;
- Competitive Event Officer Meeting, September 25, 201;
- Fall Leadership Meetings
- Fall Executive Council Meeting
- Regional Leadership Conference
- NBA game where FCCLA will be recognized,
- _____ State Leadership Conference, April 4/6, 2042

My child also has permission to swim in the pool and participate in other water activities where the conference/events will be held.

We authorize the Texas Association, Family, Career and Community Leaders of America through its agents, employees, or chaperones, and the advisor, _____, representing _____

(advisor's name)

(name of school district)

to secure any medical or other emergency services which in their reasonable discretion they believe to be necessary or desirable for our child during the said trip, and to arrange for and provide transportation for the said student to and from the meeting and to destinations during the course of that time span. Said transportation may involve public transportation, transportation in a school vehicle or a private vehicle, or a combination thereof.

We do hereby release and discharge and agree to indemnify and save harmless the Texas Association, Family, Career and Community Leaders of America, persons serving as employees, agents and chaperones of the Texas Association, Family, Career and Community Leaders of America and representatives of the _____ School District from all claims, cause of action, damages, and liabilities whatsoever which might or could be asserted by us, or by or on behalf of our said child, or against us or our child by others by reason of the exercise of the authority in this document or of any transaction, occurrence, or event arising out of or related in any way to the trip to and from the specified seminar, the seminar itself, and the stay in the seminar city.

Executed at _____, Texas, this _____ day of _____, 201:

Signature of Parent/Guardian

Address

(____)_____
Telephone Number