

STATE FCCLA LEADERSHIP CONFERENCE DRESS CODE FORM

Please fill in all portions of the dress code form and return with your conference registration form.

FCCLA Chapter ID Number _____

FCCLA Chapter _____ Chapter Advisor _____

School District _____

School and Address _____
(City) (Zip Code)

Best number to reach you (_____) _____ Region _____ County _____

E-mail address _____

School telephone _____

Alternate contact person and phone number (_____) _____

I have read the Missouri FCCLA Dress Code (adopted July 2015) and reviewed the dress code with my students. I understand that the new dress code requires members to wear “conference attire” to attend the State Leadership Conference. I agree to abide by the dress code. I understand that advisors are responsible for enforcing the dress policy. I also understand that delegates not adhering to the dress policy will not be admitted into any session.

(Chapter Advisor’s signature) (Date) (School Administrator’s signature) (Date)

MAIL, FAX or SCAN COMPLETED DRESS CODE FORM, WITH REGISTRATION FORM(S), TO:
MU Conference Office/ FCCLA
344 Hearnes Center
Columbia, MO 65211
Fax: (573) 882-1953
Scan: muconf4@missouri.edu

REGULAR REGISTRATION DEADLINE IS MARCH 3, 2016.