

# NORTH DAKOTA FCCLA 2009-2010 DISTRICT STAR EVENTS REGISTRATION FORM

Complete one registration for each STAR Events competitor

Check only one blank in each section

**EVENT YOU ARE ENTERING:**

**CATEGORY YOU ARE ENTERING:**

**FOUNDATIONAL:**

- Applied Technology
- Career Investigation
- Focus on Children
- Illustrated Talk
- Job Interview
- Life Event Planning
- Parliamentary Procedure
- Recycle & Redesign

- Junior (Grades 6-9)
- Senior (Grades 10-12)
- Occupational

**LEADERSHIP:**

- Chapter Service Project (Manual)
- Chapter Showcase (Manual)
- National Programs in Action
- Promote and Publicize FCCLA!

**TYPE OF ENTRY:**

- Individual
- Team (Attach team member entries)

**CAREER PREPARATION:**

- Culinary Arts
- Early Childhood
- Interior Design
- Teach and Train

All entries for district competition must be accompanied with a non-refundable **\$10.00 entry fee** per person per event. (Districts may assess additional fees to defray expenses). Send this form and the appropriate fees to the District STAR Events Chairperson at least **two weeks** before the date of district competition.

Individuals or teams that score the highest in district competition will be eligible for state competition. No state entry fee will be charged.

1. All District STAR Events competitions should be completed by March 1, 2010.
2. District STAR Events Chairpersons are to send all the district entry forms and the fees to the state advisor postmarked no later than March 5, 2010.

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**APPLICATION INFORMATION** (Please Print)

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Home Mailing Address: \_\_\_\_\_  
Street, PO Box City Zip

Grade Level in School: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title of Project: \_\_\_\_\_

Does your project require an electrical outlet?  Yes  No

Does your project require a table?  Yes  No

## **SCHOOL INFORMATION**

School: \_\_\_\_\_ Chapter: \_\_\_\_\_

School Phone: \_\_\_\_\_ District: \_\_\_\_\_

Advisor's Name: \_\_\_\_\_

## **NORTH DAKOTA ASSOCIATION FCCLA AUTHORIZATION FORM**

**NOTE: This form must accompany the STAR Events registration. (Required of all FCCLA members participating in STAR Events.)**

### **A. PARTICIPANT AUTHORIZATION**

I hereby certify that I am an affiliated (state and national dues-paying FCCLA member for the year in which I am participating in the ND FCCLA Star Events and that my advisor/instructor has provided me with verbal and written instructions regarding rules and procedures for my STAR Events.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of STAR Events Participant

### **B. PARENT, GUARDIAN AUTHORIZATION**

\_\_\_\_\_ has our permission to participate in the STAR Events held in the Bismarck area on Sunday, April 11 and Monday, April 12, 2010. I understand that every effort will be made to supervise the student. However, I will not hold the North Dakota Association of FCCLA or the \_\_\_\_\_ public school, or any supervisory staff responsible should an accident occur.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

### **C. FCCLA ADVISER AUTHORIZATION**

I hereby certify that the FCCLA member listed on this application has been authorized to represent our chapter as a participant and has received both written and verbal instructions concerning the rules and procedures pertinent to the STAR Events.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Adviser

### **D. LOCAL ADMINISTRATOR AUTHORIZATION**

I have been informed of the STAR Events, and I support the participation of our FCCLA Chapter in these activities.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Administrator