



Louisiana Technology Student Association

Beverly Britton, State Advisor
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September 12, 2008

To: LTSA Chapter Advisors, Alumnus, and Members

From: Beverly Britton, LTSA State Advisor

Subject: Louisiana Technology Student Association Fall Leadership Training Conference

Dear, LTSA Advisor, Alumnus, and Members:

This letter is to inform you that fall leadership conference will be held at the Louisiana Youth Educational Recreation Center in Bunkie, La, on November 10 & 11, 2008. The cost of the conference is \$70.00. This includes meals, lodging for one night, T-Shirt, meeting rooms, speaker and conference material. Pre-registration by **October 31, 2008**.

It is suggested that you bring some snack foods and plenty of change (quarters) for the soda machine. You will be staying in cabins that are equipped with a community bathroom, bunk beds, and air conditioning. You must bring sheets, blankets, and pillows. You will also need to bring all toiletries including: toothbrush, toothpaste, soap, towels, and toilet paper. If you have any other special requirements such as medication or contact lenses, please bring that paraphernalia as well. You may want to bring some games.

The clothes that you will be wearing is school wear. If you are a state officer, you are required to wear official dress during conference activity.

All students are required to participate in conference activities. The purpose of this conference is to develop leadership skills and friendships that will help your chapter advance. You will meet students that you will remember for the rest of your life. The only way to meet these students is to get out there and introduce yourself. I challenge each of you to try to meet one new student during each activity. You may be surprised at how easy it is to talk to someone. They may be just as nervous as you are about meeting new people.

Look forward to seeing you soon.

Beverly Britton, State Advisor

LTSA Conference Registration

Fall Leadership Training Conference

Parish: _____

Advisor(s): _____

School: _____

School Address: _____

School Phone: _____

Advisor/Teacher (40.00)

1. _____

2. _____

3. _____

Chaperone/Guest/ Alumni (\$40.00)

1. _____

2. _____

3. _____

State Officer Name and Office Held (\$0)

1. _____

2. _____

Student Member Name and Office Held (if applicable \$70.00)

1. _____

11. _____

2. _____

12. _____

3. _____

13. _____

4. _____

14. _____

5. _____

15. _____

6. _____

16. _____

7. _____

17. _____

8. _____

18. _____

9. _____

19. _____

10. _____

20. _____

** If you need more space for student names, simply attach a sheet of paper to this form.*

Advisor/Teacher _____ X 40= _____

Chaperone/Guest/Alumni ____ X 40= _____

Student Members _____ X 70= _____

State Officers _____ X 0 = no Charge _____

Total Number of Attendees: _ X Total due: _____

Please return this form with your check made payable to LTSA to the following address:

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 Post Office Box 2247
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LTSA ORDER FORM FOR T-SHIRTS

Conference Dates: November 10 & 11, 2008

Deadline to turn in this form is October 31, 2008

** We are only ordering what is needed!!!

Name of School: _____

Advisor's Name : _____

Phone Number: _____

e-mail address: _____

Fax Number : _____

Total Number of T - shirts Ordered _____

	Quantity
Number of Large T - Shirts	
Number of X-Large T - Shirts	
Number of XX-L T - Shirts	
Number of XXX-L T - Shirts	

PERSONAL LIABILITY AND MEDICAL RELEASE

This form is required of all children, students and adults who attend a State TSA conference. No conference attendee is allowed to participate unless this form is received by LTSA. Parents, chapter advisors, and state advisors: Please make a copy of this completed form for your records. It is the responsibility of the chapter advisor to give a copy to the state advisor prior to the conference,

Name _____ Home telephone _____
Home street address _____ City/state/zip _____
Social security # _____ Date of birth _____
Advisor _____ State Delegation _____
School _____ School telephone _____
School street address _____ City/state/zip _____

MEDICAL INFORMATION (children and students only)

1. Allergies (drug or otherwise) _____
2. Current medication _____
3. Describe any history of heart condition, diabetes, asthma, epilepsy, or rheumatic fever, Etc. _____
4. Physician name _____ physician telephone _____

"I hereby agree to release the Louisiana Technology Student Association, Inc its representatives, agents, servants, and employees from liability for any injury to above named person at any time while attending the Louisiana Technology Student Association's annual conference, including travel to and from the conference, excepting only such injury or damage resulting from willful acts of such representatives, agents, servants, employees."

"I do voluntarily authorize the Louisiana Technology Student Association's state advisor, assistants or designees for any and all claims, demands, actions, rights of action or judgments by or on behalf of the above named person and designees for any and all claims, demands, actions, rights or action, or judgments by or on behalf of the above named person arising from or on account of said procedures or treatment rendered in good faith and according to accepted medical standards."

"I hereby authorize any physician member of the Department of Emergency Medicine of an accredited hospital or any member of the medical staff of an accredited hospital to render medical treatment, which is his/her judgment is deemed necessary in the care of the above named person (child or student) while attending the Louisiana TSA annual conference, including time traveling to and from the conference."

Signature of parent or guardian (if child or student)

Participant or advisor's signature

Date

A COPY OF THIS FORM MUST BE KEPT BY THE STATE AND CHAPTER ADVISORS AT THE CONFERENCE AND GIVEN TO APPROPRIATE MEDICAL AUTHORITIES IN THE EVENT OF A MEDICAL EMERGENCY.

Code of Etiquette

Conduct Practices and Procedures for the LTSA Leadership Training Conference

Each person attending the Louisiana TSA Leadership Training Conference must read this page, complete the attached form and return it to the State Advisor as partial completion of attendance requirements. You can mail in the forms or deliver them at registration. Every attendee must have a signed form!

1. The term "delegate" shall mean any student or adult attending the conference.
2. There shall be no defacing of public property. Any damages to any property or furnishing must be paid by the individual or chapter responsible.
3. Delegates shall keep their adult advisors informed of their activities and whereabouts at all times.
4. Delegates should be prompt and prepared for all activities.
5. Delegates should be financially prepared for all possibilities.
6. No alcoholic beverages nor narcotics in any form shall be possessed by delegates at any time, under any circumstances.
7. Delegates are required to attend all general sessions and assigned activities.
8. Identification badges will be worn at all times and must be visible.
9. The dress code must be followed at all times.
10. Advisors will be responsible for seeing that their students are on time and attend all meetings.
11. Chapter advisors will be responsible for all delegates' conduct.
12. Curfew will be enforced. (Curfew means delegates will be in their assigned room and are not allowed to leave without permission from the chapter advisor and security personnel.)

Delegates violating or ignoring any of the Conduct Rules may be sent home immediately at their own expense.

Dress Code

Delegates must adhere to the following dress code requirements while in attendance at the LTSA Leadership Training Conference:

Casual Attire

Casual pants, casual but neat blouses or shirts; skirts or dresses (appropriate in length); neat jeans (no holes, frays or sagging jeans); tennis or casual shoes; t-shirts (must be neat and in good taste). Caps/hats are NOT to be worn indoors. Swimsuits should be worn to and from the pool - not into conference rooms or the hotel lobby, gift shop, or restaurants.

LTSA STATE CONFERENCE

BEHAVIOR AGREEMENT

CHAPTER ADVISOR DEADLINE: POSTMARK DATE OF OCTOBER 31, 2008

CHAPTER ADVISOR ADDRESS:

Beverly Britton, LTSA State Advisor
Louisiana Technology Association
P.O. Box 2247
Kenner, LA 70063

SCHOOL: _____
DELEGATES NAME: _____
DELEGATE: _____

"I have read and completely understand the State Conference Code of Behavior and Dress Code of the Louisiana Technology Student Association."

"I do hereby agree to follow the procedure and practices described. I fully understand that this is an education activity and will, to the best of my ability, apply myself for the purpose of learning and uphold at all times the finest qualities of a person representing the Louisiana Technology Student Association."

Participant Signature

Date

PARENT/GUARDIAN - ADVISOR - PRINCIPAL:

"I approve the student named above to attend the State Conference of the Louisiana Technology Student Association in Bunkie, Louisiana on November 10 & 11, 2008.

Chapter Advisor's Signature

Date

Parent or Legal Guardian Signature

Date

School Principal's Signature

Date