

2018 FCCLA National Leadership Meeting

Atlanta, GA

June 28-July 2, 2018



MINNESOTA ROOMING ASSIGNMENT

NOTE: The Chapter Advisor should complete this form for the delegates attending from their school. Only one form needed per school.

School/Chapter _____

Contact Name/Home Phone Number _____

Are you sharing housing with another chapter? If yes, please list: _____

Arrival Date _____ Departure Date _____

Name(s) of delegate(s) in room:	Male/Female?	Name(s) of delegate(s) in room:	Male/Female?
1.		1.	
2.		2.	
3.		3.	
4.		4.	
If this room has less than 4 people in it, would you accept an additional person? <input type="checkbox"/> Yes <input type="checkbox"/> No, we wish this room to remain a: <input type="checkbox"/> DOUBLE OR <input type="checkbox"/> TRIPLE room		If this room has less than 4 people in it, would you accept an additional person? <input type="checkbox"/> Yes <input type="checkbox"/> No, we wish this room to remain a: <input type="checkbox"/> DOUBLE OR <input type="checkbox"/> TRIPLE room	
1.		1.	
2.		2.	
3.		3.	
4.		4.	
If this room has less than 4 people in it, would you accept an additional person? <input type="checkbox"/> Yes <input type="checkbox"/> No, we wish this room to remain a: <input type="checkbox"/> DOUBLE OR <input type="checkbox"/> TRIPLE room		If this room has less than 4 people in it, would you accept an additional person? <input type="checkbox"/> Yes <input type="checkbox"/> No, we wish this room to remain a: <input type="checkbox"/> DOUBLE OR <input type="checkbox"/> TRIPLE room	

Comments/Special Needs: _____

Send no later than April 26, 2018 to: **FCCLA, c/o The Meeting Connection, Inc., 6373 Meadow Glen Drive North, Westerville, Ohio 43082-8299** Phone: 614-898-9361; Fax: 614-898-9364; Email: info@fccla.us;
Online Reservations: mn.fccla.us or www.fccla.us/minnesota