Registration- MN FCCLA November 2018 Summit

November 4 and 5th St Cloud, MN Kelly Inn Best Western 100 4th Ave S, St Cloud, MN 56301

**Registration due to be received by MN FCCLA by October 24, 2018**

**Late fee $10.00 per person after Oct 24. Send check to MN FCCLA, PO 131386, Roseville, MN 55113**

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

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| Registration amounts- includes meals. **Deadline Received by Oct 24. Late fee Add $10.00** |
| 1.**Student registration**: $40.00**, Area Officer** registration =$20.00, **State Officer Registration** =$0 |
| 2.**Adviser/ Chaperone registration**: $40.00 |
| *Attach scholarship application page:* 3.Reduced registration for Middle level Affiliation student (Scholarship) : $10.00*\*Member is part of a lump sum middle level affiliated membership of all FCS students in grades 6,7,8.* |
| *Attach scholarship application page:* 4.Reduced registration (Scholarship for Financial consideration) (Student qualifies for a free or reduced lunch student status, Poverty level family income- can be verified by school official: $ 10.00 |
| **Name** | **Grade or Adviser or chaperone** | **Sunday Student Workshop preference check one:** | **Meal preference** | **Registration categories** | **Total****Late fee – Add $10** |
| 1. |  | \_1.FACTS (Younger members)\_2.Financial Fitness\_3.Community Service | \_\_\_No special need\_\_\_gluten free\_\_\_Vegetarian\_\_\_Other: describe | Adviser/Member =$40 State Officer=$0Area Officer =$20 Scholarship student=$10**scholarship** **application attached** |  |
| 2. |  | \_1.FACTS (Younger members)\_2.Financial Fitness\_3.Community Service | \_\_\_No special need\_\_\_gluten free\_\_\_Vegetarian\_\_\_Other: describe | Adviser/Member =$40 State Officer=$0Area Officer =$20 Scholarship student=$10**scholarship** **application attached** |  |
| 3. |  | \_1.FACTS (Younger members)\_2.Financial Fitness\_3.Community Service | \_\_\_No special need\_\_\_gluten free\_\_\_Vegetarian\_\_\_Other: describe | Adviser/Member =$40 State Officer=$0Area Officer =$20 Scholarship student=$10**scholarship** **application attached** |  |
| 4. |  | \_1.FACTS (Younger members)\_2.Financial Fitness\_3.Community Service | \_\_\_No special need\_\_\_gluten free\_\_\_Vegetarian\_\_\_Other: describe | Adviser/Member =$40 State Officer=$0Area Officer =$20 Scholarship student=$10**scholarship** **application attached** |  |
| 5. |  | \_1.FACTS (Younger members)\_2.Financial Fitness\_3.Community Service | \_\_\_No special need\_\_\_gluten free\_\_\_Vegetarian\_\_\_Other: describe | Adviser/Member =$40 State Officer=$0Area Officer =$20 Scholarship student=$10**scholarship** **application attached** |  |
| 6. |  | \_1.FACTS (Younger members)\_2.Financial Fitness\_3.Community Service | \_\_\_No special need\_\_\_gluten free\_\_\_Vegetarian\_\_\_Other: describe | Adviser/Member =$40 State Officer=$0Area Officer =$20 Scholarship student=$10**scholarship** **application attached** |  |
| 7. |  | \_1.FACTS (Younger members)\_2.Financial Fitness\_3.Community Service | \_\_\_No special need\_\_\_gluten free\_\_\_Vegetarian\_\_\_Other: describe | Adviser/Member =$40 State Officer=$0Area Officer =$20 Scholarship student=$10**scholarship** **application attached** |  |
| 8. |  | \_1.FACTS (Younger members)\_2.Financial Fitness\_3.Community Service | \_\_\_No special need\_\_\_gluten free\_\_\_Vegetarian\_\_\_Other: describe | Adviser/Member =$40 State Officer=$0Area Officer =$20 Scholarship student=$10**scholarship** **application attached** |  |

**Total: (Late fee – Add $10 per person) $\_\_\_\_\_\_\_\_\_**

**November Summit Scholarship Application**

**Send along with registration to MN FCCLA, PO 131386, Roseville, MN 55113**

**Deadline: Oct 24, 2018**

**Chapter:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Funding has been received from various donation and foundation sources for specific students to be included in this MN FCCLA event will help to reduce registration costs.

We offer chapters the opportunity to apply for scholarships.

Note-Students will not be identified as scholarship recipients due to confidentially.

1. **Middle level student members ( Part of a lump sum chapter for middle level)**

I apply for the following student s for the middle level chapter scholarship. Our chapter is affiliated as a middle level chapter of all FCS students.

Name 1)

Name 2)

Name 3)

Name 4)

1. **Financial need scholarships**

I apply for the following students for scholarships to reduce their registration due to financial need (Student has a

reduced or free lunch status, or (poverty level) low family income.)

**I validate that this could be verified by school officials.**

Name 1)

Name 2)

Name 3)

Name 4)

Application by: ( Chapter Adviser)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_