

**Please fill out the permission form below if you would like to go to the 2019 FBLA Fall Leadership Conference:**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ 1<sup>st</sup> Period Teacher: \_\_\_\_\_  
 Medical Concerns: \_\_\_\_\_ T-shirt Size (S,M,L,XL,2X,3X): \_\_\_\_\_  
 Parent Name: \_\_\_\_\_ Contact #: \_\_\_\_\_  
 2<sup>nd</sup> Contact Person: \_\_\_\_\_ 2<sup>nd</sup> Contact #: \_\_\_\_\_  
 Parent Signature: \_\_\_\_\_ Can you chaperone this trip? \_\_\_\_\_

**TEACHERS:** The student asking you to sign this form wants to attend the FBLA Fall Leadership Conference on Wednesday, November 13<sup>th</sup>. Would you allow this student to attend based on his or her grades in your class, overall behavior, attendance history, and effort made in your class? If yes, please check yes and sign below.

	YES	NO	Teacher Signature:
LA Teacher:	<input type="checkbox"/>	<input type="checkbox"/>	_____
Math Teacher:	<input type="checkbox"/>	<input type="checkbox"/>	_____
Science Teacher:	<input type="checkbox"/>	<input type="checkbox"/>	_____
SS Teacher:	<input type="checkbox"/>	<input type="checkbox"/>	_____
B Day Connections Teacher:	<input type="checkbox"/>	<input type="checkbox"/>	_____

**The first 40 people to turn in this signed permission form and pay online through MyPaymentsPlus will be allowed to go on this trip. All forms and your online payment need to be received by Mrs. Jones no later than Friday, October 3<sup>rd</sup>!**

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