

Chapter Advisor Signature

	School/Chapter:	
	School/Chapter: Parent Name:	
Parent's Phone:		
release the school officials, the chapter advisors, and is sustained while he/she is inroad to and from or during I authorize the advisor and or state official to act as mexpenses for necessary services in the event of accide I, as a parent or guardian of the above named studen right to print, photograph, record, and edit as desired,	ny agent to secure the services of a dentist, physician or hospital and to incurent or illness, and I will provide for payment of these costs. t, fully authorize and grant Utah DECA and its authorized representatives, the name, image, likeness, and/or voice of the above named pupil on audicormats, for the purpose of increasing public awareness and improvement of	e ir the ne o,
(Parent/guardian initials)		
 individual responsible. Advisors will be kept informed of student activi No alcoholic beverages, tobacco, or narcotics in circumstances. Participants shall be prompt and prepared for a Participants are required to attend all general s The dress code noted in the conference registres Participants are not to drive or have access to the participants are not to drive or have access to the participants. 	any form shall be possessed by delegates at any time, under any all activities. Sessions and assigned activities. Session materials will be in effect at all times.	
to send the above named participant home from the a	uct. We also agree that the state officials and the chapter advisors have the activity at the parent/guardian expense provided he/she has violated the Cocent to themselves or other participants. We also agree that the participant me fit is not feasible to send them home.	de of
Utah DECA Member Signature	Date	
Parent/Guardian Signature	Date	
Principal Signature	Date	

Date