

UNITED FALL LEADERSHIP CONFERENCE CODE OF CONDUCT

DELEGATE CONDUCT PRACTICES AND PROCEDURES

The Iowa Associations of BPA, DECA, and FBLA members have the opportunity for involvement at the local, state, and national levels. To be eligible to attend these conferences, the students must have earned the right to attend through demonstrated desire to participate fully in all scheduled activities and a commitment to live by the UFLC Code of Conduct while attending. All delegates agree to the following rules while attending the United Fall Leadership Conference. "Delegate" refers to any BPA, DECA, FBLA member or advisor registered for and attending the conference and the activities listed in the agenda/program.

- The term "delegate" shall mean any CTSO member, including advisors, attending a conference.
- Advisors must provide all students with a written copy of all rules and trip procedures and maintain a file of assigned agreements from the student and parents including permission forms.
- Advisors will be responsible for all aspects of the trip including travel arrangements, selection and discipline of code violations.
- Advisors will be responsible for student supervision including room and curfew checks.
- There shall be no defacing of public property. Any damage to any property or furnishing in the hotel rooms or building must be paid for by the individual or chapter responsible.
- Delegates must wear identification name badges at all times.
- Delegates shall refrain from using inappropriate or profane language.
- Delegates shall refrain from written, verbal, physical, or electronic activities that may lead to harassment, hazing, bullying, or property damage.
- The use of any harassment against anyone on the basis of race, color, creed, national origin, ancestry, age, gender, sexual orientation or disability is prohibited.
- Delegates shall respect the rights and safety of other hotel or property guests.
- Delegates shall not possess alcoholic beverages, narcotics, or weapons in any form at any time under any circumstances.
- Delegates shall refrain from gambling – playing cards, dice, or games of chance for money or other things of value.
- Use of tobacco products or electronic cigarettes is prohibited at all CTSO functions.
- Delegates must adhere to the dress code at all times.
- Delegates must not dress or behave in a manner that can be interpreted as sexually explicit.
- Students shall keep their adult advisors informed of their activities and whereabouts at all times.
- No delegate shall leave the conference location unless permission has been received from chapter & association advisors.
- Delegates should be prompt and prepared for all activities.
- Delegates should be financially prepared for all activities.
- Delegates are required to attend all sessions and activities assigned including workshops, competitive events, etc. for which registered unless engaged in some specific assignment scheduled at the same time.
- Delegates will spend nights at their assigned hotel and in their assigned room. No guests allowed during curfew hours. Delegates will be quiet at curfew. Curfew will be enforced, meaning delegates must be in their assigned room.
- Major infractions that may require police action (noise violation, vandalism, assault, arson, burglary, robbery, shoplifting, and weapon or illegal substance possession) will result in the immediate removal of students involved from any further participation in CTSO activities for the school year.
- If a major infraction occurs, the Advisor will immediately contact the Association Director and the students' parents. If the student is sent home, it is the responsibility of their parents to transport their child from the event or pay to do so.
- Delegates violating any part of the Code of Conduct may subject their entire delegation to be unseated, or their officer candidates or competitive event participants to be disqualified

DISREGARDING OR VIOLATING THE CODE OF CONDUCT

Delegates who disregard or violate this code will be subject to disciplinary action, including, but not limited to, forfeiture of privileges to attend further events, confinement to your hotel room, dismissal from the conference, and being sent home at your own expense. Parents and/or guardians will be notified, and each organization reserves the right to notify law enforcement.

DRESS CODE

Sunday, November 13th

CTSO Casual

- Slacks or Jeans
- CTSO t-shirt, conference t-shirt, or CTSO color t-shirt

Monday, November 14th

Business Professional

- Dress slacks, dress skirt or business dress
- Collared dress shirt, dress blouse or dress sweater
- Dress shoes

Unacceptable Dress During UFLC Activities: Sweatpants, leggings, yoga pants, shorts, or athletic clothing

MEDIA WAIVER

I am aware that still photos and video may be posted to a website and/or be used in a variety of collateral printed pieces (i.e. brochures, newsletters, flyers, print ads). The pictures/video will be used for the purpose of illustrating, advertising, and promoting the activities associated with BPA, DECA, FBLA and future UFLC events.

Please note that no permissions is required for large group photos in which the students are not individually identified.

I have read the disclaimer and agree to allow my child to be photographed.

I have read the disclaimer and do not agree to allow my child to be photographed.

Consent

We have read and agree to abide by the UFLC Code of Conduct. We also agree that the school officials, the chapter advisors, the state association staff, or the Conference Committee members have the right to send

_____ home from the activity at our expense, provided that they have violated the Code of Conduct and/or their conduct has become a detriment to the event.

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Student Signature & CELL PHONE #

Chapter Advisor Signature

Parent or Guardian Signature

School/Official/Principal Signature

NON-DISCRIMINATION POLICY

It is the policy of the Iowa not to discriminate on the basis of race, creed, color, sexual orientation, gender identity, national origin, sex, disability, religion, age, political party affiliation, or actual or potential parental, family or marital status in its programs, activities, or employment practices as required by the Iowa Code sections 216.9 and 256.10(2), Titles VI and VII of the Civil Rights Act of 1964 (42 U.S.C. § 2000d and 2000e), the Equal Pay Act of 1973 (29 U.S.C. § 206, et seq.), Title IX (Educational Amendments, 20 U.S.C. §§ 1681 – 1688), Section 504 (Rehabilitation Act of 1973, 29 U.S.C. § 794), and the Americans with Disabilities Act (42 U.S.C. § 12101, et seq).

ATTENDANCE AND PERMISSION FORM

Attendance

This is to certify that _____ has my permission to attend the United Fall Leadership Conference. I also do hereby on behalf of them absolve and release the school officials, the CTSO chapter advisors, the assigned chartered association and chartered association staff from any claims for personal injuries or illness which might be sustained while they are en route to and from or during the CTSO sponsored activity.

EMERGENCY

Any medical exceptions to this code must be documents in the conference headquarters prior to the beginning of the conference. This is the responsibility of the local chapter advisor.

I authorize the advisor to secure the services of a physician or hospital, and to incur the expenses from necessary services in the event of accident or illness, and I will provide for the payment of these costs.

Consent and approval indicated by the signing parties are applicable to all United Fall leadership Conference activities.

ALL INFORMATION BELOW MUST BE COMPLETE TO BE CONSIDER A VALID PERMISSION FORM

We have read and agree to abide by the UFLC Code of Conduct. We also agree that the school officials, the CTSO chapter advisors, the CTSO staff, or the Conference Conduct Committee members have the right to send _____ home from the activity at our expense, provided that they have violated the Code of Conduct and/or their conduct has become a detriment to the event.

Student Signature & Cell Phone Number

Chapter Advisor Signature

Parent or Guardian Signature

School Official/Principal Signature

Parent or Guardian Printed Name & Cell Phone Number

Insurance Company Name

Policy Number

MEDICAL DIRECTIVE OR MEDICATIONS DECLARED BELOW

COVID-19 ACKNOWLEDGEMENT

The Iowa Associations of BPA, DECA and FBLA have implemented protective measures and protocols aimed at reducing the likelihood of spread of the novel coronavirus ("Covid-19") between participants and others attending its events. These measures and protocols are designed to be consistent with current guidance from the U.S. Centers for Disease Control and Prevention ("CDC"), as well as state and local authorities. However, BPA, DECA and FBLA cannot guarantee that event participants will not be exposed to Covid-19 while participating in or attending its events.

By signing this agreement, I acknowledge, on behalf of myself or my minor child(ren) named below, the risk of Covid-19 transmission while participating in or attending UFLC and further acknowledge that we are knowingly assuming that risk by voluntarily participating in or attending an event. We further agree to comply with all protective measures and protocols implemented by the CTSO, the event's host hotel, the event's suppliers and partners, and/or established by the CDC and state or local authorities.

Accordingly, I (individually or on behalf of my minor child(ren) listed below) voluntarily agree to assume all risks and accept sole responsibility for any Covid-19 infection that may result due to participation in or attendance at the event. On my behalf, or on behalf of my minor child(ren) listed below, I hereby release, covenant not to sue, discharge, and hold harmless Iowa BPA, DECA and FBLA, their employees, agents, and representatives, of and from any claims associated with, arising from, or related to Covid-19 infection, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of BPA, DECA and FBLA, its employees, agents, and representatives, whether a Covid-19 infection occurs before, during, or after our participation in or attendance at the event.

Signed: _____ Date: _____

Printed Name: _____

Names of Minor Family Members Participating In or Attending Event:

1. _____

2. _____

3. _____

4. _____