



**Virginia TSA
Leadership Academy**

"Expanding Horizons"

November 20-21, 2009

Kirkley Hotel

2900 Candler's Mountain Road * Lynchburg,

Virginia 24502

(434) 237-6333

2009 Virginia TSA Leadership Academy Conference Information Packet

State Leadership Academy Purpose:

This year's state leadership academy is designed to help Virginia TSA members learn how to be, or continue to be great leaders. In order to complete this purpose, guidance will be given in not only leadership but also communication and teambuilding activities through hands-on break-out sessions. This academy provides opportunities for members who attend to gain knowledge and skills to help them succeed on the regional, state, and national level.

This is an ideal opportunity for new chapter officers and new chapters to get together and interact to strengthen chapter efforts.

To assist you in planning your trip, a tentative agenda for the Academy is included.

HOTEL RESERVATIONS / TAX EXEMPT FORM

Our hotel will be the Kirkley Hotel located in Lynchburg, Virginia. Your hotel registration is due **to the Kirkley Hotel by November 6, 2009.**

DRESS CODE

On Friday, please wear business casual attire as stated by national TSA. Participants will receive a t-shirt at registration on Friday. Virginia TSA is asking all attendees to wear their academy t-shirt on Saturday. Students will not be allowed to participate unless appropriate dress is worn. It is the **advisor's responsibility** to see to it that his/her delegation is appropriately dressed at all times while involved in official Virginia TSA functions.

CODE OF BEHAVIOR, PERSONAL LIABILITY AND MEDICAL RELEASE, PHOTOGRAPH RELEASE FORMS, AND ADVISOR'S CONTRACT

Please copy each form for all participants from your chapter. Have them signed and bring them with you to the meeting. These forms are for your protection in emergency situations. Make two copies of the affidavit. One copy will be collected at registration; the other copy should remain with the advisor at all times.

CONFERENCE REGISTRATION FORM

The **Virginia TSA Fall Leadership Academy** will be held **November 20-21, 2009** at the **Kirkley Hotel** located in **Lynchburg, Virginia**.

- **Registration cost is \$30.00 per participant.**
- **Advisors, chaperones, & parents must register in order to receive breakfast, lunch and a tee shirt for \$15.00. If not registered for the conference, all meals will be the responsibility of the advisor, chaperone, or parent.**
- **Deadline for Registration in October 23, 2009.**
- State Executive Council members do have to register and pay the registration fee.
- Registration for the Academy is limited to **8 students per school** plus any State Executive Council members.
- Registration fees will cover breakfast and lunch on Saturday and the 2009 Academy tee-shirt.
- Complete the enclosed registration form and **return** it by **October 23, 2009**.
- Chaperones/Advisors will be responsible for the behavior of their delegation and for transportation to/from the hotel.
- **Late registration will be \$40.00 per participant.** Participants registering late are not guaranteed an Academy t-shirt.
- There will be no on-site registration.
- Shirt sizes **must** be included on your registration form.
- Bring a copy of the Photo Release Form to the Conference.
- Makes checks payable to: **Virginia TSA**

Mail **registration fees** and **registration form** to:

**Ms. LaTasha Watson
Virginia TSA
P O Box 9045
Petersburg, VA 23806.**

Meals

Dinner on Friday will be on your own. Breakfast and lunch will be served on Saturday in the hotel.

**2009 Virginia TSA
Leadership Academy Registration Form
Kirkley Hotel
Lynchburg, Virginia**

Advisor: _____

School/Organization Name: _____

Address: _____

City: _____ State: _____ Zip: _____

School/Office Phone: (____) _____ Home: (____) _____

Email: _____

Student Names- (Please Print)

_____ Shirt: S M L XL XXL

_____ Shirt: S M L XL XXL

_____ Shirt: S M L XL XXL

_____ Shirt: S M L XL XXL

_____ Shirt: S M L XL XXL

_____ Shirt: S M L XL XXL

_____ Shirt: S M L XL XXL

_____ Shirt: S M L XL XXL

_____ Shirt: S M L XL XXL

Advisor/Chaperone

_____ Shirt: S M L XL XXL

Advisor/Chaperone

Number of Students _____ x \$30.00 = _____

Advisors _____ x \$15.00 = _____

Total = _____

Make checks payable to: **Virginia TSA**

The 2009 Virginia TSA Leadership Academy

Kirkley Hotel

Lynchburg, Virginia

Tentative Agenda

Friday, November 20, 2009

4:00 - 6:30 P.M. -----	Check-in
6:00 - 6:45 P.M. -----	Dinner (On your own)
7:00 - 8:30 P.M. -----	General Session/ Key Note Speaker
8:45 - 10:45 P.M. -----	Leadership Activities
11:30 P.M. -----	Curfew

Saturday, November 21, 2009

8:00 - 8:50 A.M. -----	Breakfast
9:00 - 9:40 A.M. -----	First Break-Out Session
9:45- 10:25 A.M. -----	Second Break Out Session
9:00 - 10:25 A.M. -----	Advisor Workshop
10:30- 11:00 A.M. -----	Check out
11:00- 11:15 A.M. -----	Photographs
11:20- 12:00 P.M. -----	Third Break-Out Session
12:00- 1:00 P.M. -----	Lunch
1:05 - 1:45 P.M. -----	Fourth break-out session
1:50 - 2:50 P.M. -----	Award Ceremony

3rd Annual

**Virginia TSA
Leadership Academy
November 20-21, 2009**



Kirkley Hotel

2900 Candler's Mountain Road Lynchburg, Virginia 24502

(434) 237-6333

The Virginia TSA Statewide Leadership Academy rate is **\$87.19 which includes tax** (single or double). Each reservation must be accompanied by a one night deposit. If paying via credit card, provide those details at the bottom of this form.

OPTION I

Reservations can be made **calling the hotel at (434) 237-6333**
Then specify that you are with **Virginia TSA**.

If paying for your room with a check, make sure to let the person taking the reservation know while on the phone. This is on a first come, first serve basis – don't delay!

Special notes:

1. All changes, cancellations, etc. should be received by the hotel prior to November 6, 2009.
2. Chapter advisors must assume responsibility and liability for all charges incurred by his/her delegation.
3. "No Shows" will be billed for one night's room and tax.
4. No "On-Site" cancellations
5. Indicate "Advisor's Room" on reservation form.

09 Virginia TSA Leadership Academy, November 20-21, 2009

VIRGINIA TSA
SCHOOL FORMS VERIFICATION AFFIDAVIT
2009-2010
<<Please return this form to Virginia TSA>>

We herein verify that the school has obtained the required forms for participation at the 2009 Virginia TSA Leadership Academy from each student attending. The forms are 1) Student Conduct, 2) Student Liability, and Student Medical Release.

Further, we verify that the chapter advisor will maintain the forms and have them available if needed 24 hours per day while traveling to the 2009 Virginia TSA Leadership Academy, during the 2009 Virginia TSA Leadership Academy, and on the return trip back to the school.

School Name: _____ School Division: _____

Total Male Students: _____

Total Female Students: _____

Total Teachers/School Staff: _____

Parents, guest, others: _____

Chapter Advisor: _____
Print First and Last name Signature Date

Principal: _____
Print First and Last name Signature Date

**PERSONAL LIABILITY FORM
VIRGINIA TSA
2009-2010**

No student or child attendee will be allowed to participate in Virginia TSA Leadership Academy or state activities unless the chapter advisor has an original copy of this form at all times.

REQUIRED BY: STUDENT/CHILD CONFERENCE ATTENDEES

**CHAPTER ADVISOR MUST MAINTAIN A COPY OF THIS FORM AT THE SCHOOL
AND BRING THE ORIGINAL COPY TO THE LEADERSHIP ACADEMY.**

Name of participant: _____

School: _____

Address: _____

Home phone: _____ School phone: _____

"I hereby agree to release the Virginia Association of the Technology Student Association, its representatives, agents, servants, and employees for liability for any injury to above named person at any time while attending the Virginia TSA conference and activities, including travel to and from such activities, excepting only such injury or damage resulting from willful acts of such representatives, agents, servants, and employees."

"I do voluntarily authorize representatives of Virginia TSA to obtain emergency medical treatment for the above named person as deemed necessary."

"I agree to indemnify and hold harmless the representatives of the Virginia Association of the Technology Student Association and said TSA State Advisor and/or conference management staff for any and all claims, demands, actions, rights of action, and/or judgments by or on behalf of the above named person arising from or on account of said procedures and/or treatment rendered in good faith and according to accepted medical standards."

2009 Virginia TSA Leadership Academy – November 20- November 21, 2009

Parent/Guardian Signature _____ Student Participant Signature _____

Date _____

NOTE: Chapter advisors may use the same form for Technosphere provided each event is properly signed and dated.

<<< Do not mail this form to Virginia TSA >>>

**VIRGINIA TSA DELEGATE
CONDUCT PRACTICES AND PROCEDURES AGREEMENT FORM**

1. **"Delegate" shall mean any TSA member (voting/non-voting) attending the conference.**
2. There shall be no defacing of public property. Any damages to the property or furnishings in the hotel rooms or building must be paid by the individual(s) or chapter(s) responsible.
3. Delegates shall keep their advisors informed of their activities and/or whereabouts at all times.
4. Delegates should be prompt and prepared for all activities.
5. Delegates should be financially prepared for all possibilities.
6. Delegates not staying at the official conference hotels shall return to their legal residence by curfew or immediately following the last scheduled event.
7. No alcoholic beverages, narcotics or firearms, in any form, shall be possessed by delegates, alumni or other conference attendees at any time, under any circumstances.
8. No delegates shall leave the conference site unless accompanied by the Chapter Advisor(s) and/or chaperone(s).
9. Delegates and Voting Delegates are required to attend all general sessions and activities assigned, including workshops, competitive events, committee meetings, etc. for which they are registered, unless engaged in some specific assignment taking place at the same time.
10. Identification badges must be worn at all times by all persons in conference attendance.
11. Chapter Advisors will be responsible for their delegates' conduct en route to the conference, during the conference, and during delegates' return to home school.
12. Delegates violating or ignoring any of the conduct rules will subject their entire delegation to being unseated and their candidates or competitive event participants to being disqualified. Individual delegates may be sent home immediately at their own expense. Curfews will be enforced (all delegates will be in assigned rooms by the announced times).
13. Casual wear will be accepted only during specific social functions, as designated.
14. The Virginia TSA Standards Review Committee reserves the right to dismiss any delegate from the conference for inappropriate actions.

I have read, I understand, and I agree to conduct myself according to the conduct practices and procedures listed above.

Student Delegate Signature

Parent Signature

The parent must initial each event for which this form applies:

Statewide Leadership Academy: November 20- November 21,

2009 ____

Chapter advisors may use the same form for all Virginia TSA sponsored events provided the form is properly signed and initialized where applicable. Chapter Advisors are responsible for maintaining the form. The original form must accompany the chapter advisor at all times at the Virginia TSA Statewide Leadership Academy, a Regional Fair, or Technosphere.

<< Do not mail this form to Virginia TSA >>>

MEDICAL RELEASE FORM
VIRGINIA TSA
2009-2010

REQUIRED BY: STUDENT/CHILD CONFERENCE ATTENDEES
CHAPTER ADVISOR MUST MAINTAIN A COPY OF THIS FORM
AT SCHOOL AND BRING THE ORIGINAL COPY TO THE REGIONAL FAIR.

Student: _____ Social Security # _____

Advisor: _____

School: _____ State: _____ Zip: _____

Medical Information (Print Clearly)

1. Known drug allergies: _____
2. Last tetanus administration received: _____
3. Describe any history of heart condition, diabetes, asthma, epilepsy or rheumatic fever, etc:

4. Medication currently being taken: _____
5. Physical restrictions (swimming, running, etc.) _____
6. Other conditions: _____
7. Physician: _____ Work: _____ Home: _____
8. Relative: _____ Work: _____ Home: _____
9. Name of medical insurance company: _____ Policy # _____

I hereby give permission for emergency medical treatment of _____ (Name of Student/Child)
while attending conferences and leadership activities of Virginia TSA.

Signature of parent/guardian: _____

Statewide Leadership Academy
November 20- November 21, 2009

Parent/Guardian Initials

Date

Chapter advisors may use the same form for all Virginia TSA sponsored events provided the form is properly signed and initialized where applicable. Chapter Advisors are responsible for maintaining the form. The original form must accompany the chapter advisor at all times at the Virginia TSA Statewide Leadership Academy, a Regional Fair, or Technosphere.

Photo Release Form

Permission to Use Photograph. Bring a copy of this form to the Leadership Academy.

Subject: Virginia TSA Statewide Leadership Academy

Location: **Kirkley Hotel**

2900 Candler's Mountain Road

Lynchburg, Virginia 24502

(434) 237-6333

I grant to Virginia TSA, its representatives and employees the right to take photographs of me and my property in connection with the above-identified subject. I authorize Virginia TSA, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Virginia TSA may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Signature _____

Printed name _____

Organization Name (if applicable) _____

Address _____

Date _____

Signature, parent or guardian _____
(if under age 18)

Date: _____

Bring a copy of this form to the Leadership Academy.