

Louisiana HOSA State Leadership Conference

March 2 - 3, 2020

Registration Form

Registration fee: \$115.00 (includes meals)

Submit this form to your Chapter Advisor with payment.

For Teacher Use:

Amount Paid: _____

Cash or Check # _____

All forms submitted? _____

Student registered online? _____

Please Print Clearly **Registration Deadline: February 14, 2020**

Name: _____ School: _____ Parish: _____

Cell Phone: _____ Email: _____

Student: _____ Chapter Advisor: _____ Chaperone: _____ Guest/Family: _____

Options / Activities

Grade in School: _____ T-Shirt Size: _____ (S, M, L, XL, 2XL, 3XL, 4XL, 5XL)

State Officer Candidate? _____ Yes _____ No Submitted Application _____ Yes _____ No

Voting Delegate? _____ Yes _____ No Voting Delegate ALT? _____ Yes _____ No

Flag/Banner Carrier? _____ Yes _____ No

National Anthem? _____ Yes _____ No Submitted Audition _____ Yes _____ No

Will you be willing to participate in Courtesy Corps (student helper) when needed? _____ Yes _____ No

**You are allowed to compete in ONE event, plus HOSA Bowl, plus as many
Recognition events as you would like.**

List Competitive Event you would like to compete in: _____

If that event is cancelled, please list your second and third event choice: _____

Chapter Advisor Events: Offering two events for you; choose one: _____ HOSA Bowl

We ask that all Chapter advisors sign up for an event. _____ Medical Spelling

HOSA Bowl Team (List Team Members; teams may have 3 or 4 only)

1) _____ 2) _____

3) _____ 4) _____

List Recognition Events you are participating in:

1) _____ 2) _____

3) _____ 4) _____