

FCCLA Dues: \$15.00 FCCLA Dues with T-Shirt: \$25.00

Last Name:	First Name:		Birthdate:/	/
Address:		City:		
Home WP Teacher:	Grade: Were	you an FCCLA men	nber last year?  Yes	□ No
Have you taken FACS Classes before?  Yes	No If so, what class	es?		
Demographic (Circle one): African Americ	ca Asian Caucas	ian Hispanic	Native American	Other
Parent or Guardian's first and last name(s):	<u> </u>			
Phone Number of Parent or Guardian:				
Email of Parent or Guardian:				
Parents:  Hi! I'm Caitlin Mitchell, the FCCL member, you can be as active as yat NOHS, during the school day as weekends. I will send out notificatis a chance for your student to but and have a great time! If you have comitchell@oconeeschools.org.  Yes No My child has permission or my one of the permission of the comparent of the permission of the comparent of the comparent of the permission of the comparent of	you want. Some FCC way from NOHS, beintions about upcominated relationships, do re any questions, please on to participate in NOI CLA member, my child's bsite.	CLA events are fore and after a ng events and evelop teamwo ease contact m  HS FCCLA.  picture may be tak	held during the s school, and during field trips. Parent ork and leadership e at en and submitted to th	school day g cs, FCCLA p skills, ne local
	email, Remind, and soci lrive, I agree that I will pi	al media.		
Parent Signature:			Date:	_
<b>FCCLA Members:</b> As a member of NOHS FCCLA, I agree to in the community.	abide by all school rules	and the FCCLA C	ode of Ethics whether	on campus o
I would like a t-shirt: ☐ Yes ☐ No (If	yes, I agree to pay the addit	ional \$10 fee). T-shi	rt Size (Adult	Small to 2X)
Member Signature:			Date:	
For FCCLA Advisor's use only:		pt #		