2022 SLC Conference Verification Form
You must complete this form, in order to request hotel rooms for the conference.

Advisor Name *

Advisor Email *

Advisor's Contact Phone Number *

School/Career Center *

I have registered my school, students, advisors, chaperones and guests (if applicable) *
You MUST be registered for the conference before you can proceed with the form.

☐ Yes, I understand

I understand there should be a 1:10 ratio (advisors & chaperones per student) *

☐ Yes, I understand

Total registered for your school/career center *
The total should be all advisors, students & guest/chaperone.

2022 SC HOSA SLC Registration Check Lists
Explanation of Courtesy Corp, Outstanding HOSA member (OHM) & voting delegates can be found in the "Forms, Photos and Options" on the State Conference page.

REGISTRATION CHECK LIST *
By checking the boxes below, you are agreeing you will adhere to ALL POSTED DEADLINES.
I HAVE completed registration for my chapter.

☐ I WILL designate up to four members to serve as Courtesy Corps on the online registration.

☐ I WILL designated votinglegates and alternates on the online registration.

☐ I WILL designated a member of my chapter as the Outstanding HOSA Member (OHM) if applicable, in the online conference registration.

☐ I WILL email a Photo of my chapter's OHM (JPEG, PNG or PDF format) to Amanda Wilson at schosa1@sc.r.com. Photos must be received by March 18 to guarantee them in the PowerPoint during the Opening Session, Sunday night.

☐ I WILL email a Photo of my local chapter (JPEG, PNG or PDF format) to Amanda Wilson at schosa@outlook.com. Photos must be received by March 1st to guarantee them in the PowerPoint during the Opening Session, Wednesday night of the conference.

CERTIFICATIONS OF RECEIPT OF SC HOSA FORMS *

By checking the boxes below, you are agreeing you will have a, Code of Conduct for each STUDENT, ADVISOR and GUEST/CHAPERONE. A Medical form for each STUDENT, ADVISOR and GUEST/CHAPERONE, to be turned in at the 2022 SLC Registration table. If any forms are missing, you take full responsibility for the omissions. Instructions on how to submit the forms can be found on “Forms, Photos & Options” on the Stater Conference page. By checking the boxes below, you are agreeing you will have each form for each attendee for the SLC Conference.

☐ Code of Conduct Form (for every Advisor, student, guest and chaperone)

☐ Medical Form (for every Advisor, student, guest and chaperone)

RECOGNITION EVENTS-

By typing your name below, you understand, you MUST be entered in the Activity Log at HOSA.org and approved by the deadline to be recognized. Chapter Reflections and HOSA Happenings entries should be brought to the room assigned at the submission time listed in the program. • Barbara James hours entered and verified (DEADLINE, FEBRUARY 10TH to be recognized in the conference program). • National Service Project (DEADLINE, FEBRUARY 10TH to be recognized in the conference program). • MRC Volunteer hours entered and verified (DEADLINE, FEBRUARY 10TH to be recognized in the conference program). • DEADLINE, FEBRUARY 24TH for late Barbara James, National Service Project, and MRC Volunteer hour entries (late entries will not be recognized in the conference program).

REGISTRATION FEES *

By checking the box, you are certifying you understand the following:

☐ Check for $85/per person registration will be mailed/received by March 1, 2022

☐ OR Registrations may be paid with a credit card, however there will be a 3% service fee per registration

STUDENT ELIGIBILITY FORM *

By checking the box below you understand you will have the below forms entered into Tallo by the posted deadline, if applicable.
Student Eligibility form will be submitted through TALLO, by March 1st for students competing in Life Support Skills, Personal Care, Speaking Skills, and Interviewing Skills. These events are for students classified under the provision of Public Law 102/119 entitled: Individuals with Disabilities Education Act of 1992. In the guidelines for each of these competitive events is the Student Eligibility form. (www.hosa.org)

☐ N/A

ADVISOR SIGNATURE *
By typing your name below, you are certifying that you understand all of the above statements and will adhere to all posted deadlines.

Hotel Choices
Many of the hotels are FULL. Once you complete the form, I will assign a hotel that can accommodate your group, depending on how many rooms you require. PLEASE NOTE: You are NOT guaranteed rooms because you are issued a rooming list. You MUST make your reservations within 72 hours of receiving your rooming list form. Otherwise those rooms may be issued to another school.

How many hotel rooms will you be reserving? *

Comments

Any questions, regarding hotels or this form, Contact Amanda Wilson, schosa@outlook.com

Captcha

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Submit