2024 SCASC State Convention: Meet Us Down in the Leadership Bayou

We are so excited to have you at Spring Valley High School this year for the SCASC State Convention! In this packet, you will find all information and forms you should need. This year we are asking that you scan all paperwork and email to <u>leadershipbayou24@gmail.com</u>. All that you will need to mail is your check. Please make sure that the name of your school is on the check mailed. However, you can also pay by credit card.

Registration Information:

- Complete online registration and hard copy of all paperwork
- Registration Fee: \$110 per delegate & \$85 per advisor
 - Includes t-shirts

• Check must be postmarked by February 9th, 2024

Each school may bring a maximum of 15 student delegates

 Candidates for office and current state and district officers do not count toward the school maximum.

- Reminder: Candidates for office cannot do workshops.
- Late Registration: \$130 per delegate & \$105 per advisor
 - Includes t-shirt
 - Postmarked after Friday, February 9th, 2024
 - o All late registration must be postmarked by Friday, February 16th, 2024

• If you have a special guest that will be joining your school for the banquet on Saturday night (spouse or principal), the cost will be \$25.

Payment Information: Make sure to send a copy of your composite with all payments.

- School Check: Make Check to Spring Valley High School. Mail check to Olisa Ashford at 120 Sparkleberry Ln Columbia, SC 29229
 - Like such

Spring Valley High School Attn: Olisa Ashford 120 Sparkleberry Ln Columbia, SC 29223

• Credit Card: Call Olisa Ashford- (803) 699-3500 (ext.69253) (There will be a charge for credit card payments)

SCASC Contact Information:

- Questions: chndlrlawton@gmail.com
- Additional Forms: <u>www.thegavel.org</u>

2024 SCASC State Convention - Meet Us Down in the Leadership Bayou March 8-10, 2024 -- Hosted by Spring Valley High School Composite Form/Invoice

Registrant Information (Please type or print neatly.)

Regular Registration Postmarked by: Feb. 9th 2024, Late/FinalDeadline Registration- Postmarked by: February 16th, 2024

School Name:	SCASC District:			
School Address:			_ City:	Zip Code: Advisor's Cell Phone:
School Phone: Adv	visor's Name:		A	Advisor's Cell Phone:
Advisor's Email:				
Principal's Name: Principal's Phone:				
Student Delegate (\$110 per Delegate/\$85 per advisor) LATE: \$130 per delegate/\$105 per advisor)	Cell Phone Number	Grade	T-Shirt Size	Dietary Needs/Allergies
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

Candidates (\$110 per Candidate)	Cell Phone Number	Grade	T-Shirt Size	Dietary Needs/Allergies
1.				
2.				
3.				

State Officer (NO CHARGE)	Cell Phone Number	Grade	T-Shirt Size	Dietary Needs/Allergies
1.				
2.				
3.				

Advisor(\$85 per Advisor)	Cell Phone Number	Grade	T-Shirt Size	Dietary Needs/Allergies
1.				
2.				
3.				

Registration is not complete until all forms and money are received

Where will your school be staying?_____

If you need extra tickets for the banquet, the cost will be \$25. This would be for a special guest such as a principal or spouse.

• # of Tickets _____ x \$25=____

Regular Registration (Includes t-shirt) Regular Registration- Postmarked by: Feb.9, 2024

- Number of Delegates/Candidates: ____X \$110 each =\$ _____
- Number of Advisors: _____ X \$85 each = \$ _____
- Nonmember Delegates/Advisors: _____X \$130 each = \$_____

Late Registration (Includes t-shirt)

Late/FinalDeadline Registration- Postmarked by: February 16, 2024

- Number of Delegates/Candidates: ____X \$130 each =\$ _____
- Number of Advisors: _____ X \$105 each = \$ _____
- Nonmember Delegates/Advisors: _____X \$150 each = \$_____

Total Payment: \$ _____

If registration numbers allow it, would your school be interested in bringing more than 15 delegates?

- Yes _____
 No _____

Payment:

Make checks payable to: Spring Valley High School

 Mail all checks to and include a copy of your composite form: 120 Sparkleberry Ln Columbia, SC 29223

Credit Card: Call Olisa Ashford - (803) 699-3500 (ext.69253) (There will be a charge for credit card payments)

Paperwork:

• ALL paperwork should be scanned in and emailed to <u>leadershipbayou24@gmail.com</u>. You should be able to lay all paperwork onto a copier/scanner tray and scan in as one file.

• If scanning is too difficult, please mail the paperwork to the host school.

Spring Valley High School Attn: Olisa Ashford 120 Sparkleberry Ln Columbia, SC 29223

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Medical Permission Form

This form must be completed and submitted with your delegate registration. Advisors should make a copy of the form to keep with them at all times during the convention. No student will be registered without submitting this information. (Please print or type)

	Grade:T-Shirt Size:					
School I Attend:						
Home Address:						
	State: SC Zip:					
	Email:					
Parent's Name(s):						
Parent's Home Phone(s):	ne(s):Parent's Cell Phone(s):					
	Emergency Contact:					
Name:	Relationship:					
Phone Number:						
	ince, a copy of the insurance card (front and back) must be					
Medical Insurance Company Name: Policy Number:						
Address:						
If the student is NOT covered by	insurance, this portion must be completed and signed.					
I,, will be responsible for any medical expenses that should						
occur while my student is attending the 2024 SCASC State Convention (Spring Valley High						
Schooll).						
Parent/Guardian signature:						
	Phone:					
Brief Medical History:						
Allergies:	Medications:					

Medications

Asthma:

Diabetes:	Medications			
Epilepsy:	Medications			
Should delegate be restricted from any type of recreational activity?YesNo				
If yes, please explain):				

Are there any drugs (prescription or nonprescription) that should NOT be administered?

Any other pertinent information:

NOTE: If you are taking medication regularly, please bring a supply in labeled containers and work with your advisor as to how it will be dispensed.

The undersigned parent or guardian of ______ authorizes an SCASC or Spring Valley High School representative to obtain medical care for her/him in the event such care is necessary. If possible, the parent(s) or guardian of the named individual will be contacted in the event of an emergency. Permission is hereby granted to the licensed physician or hospital staff to perform any medical and/or surgical procedures that are deemed essential to the treatment of the above individual.

The parents or guardian of each student attending hereby releases Spring Valley High School and the South Carolina Association of Student Councils and its representatives from liability for any occurrence in relation to said convention.

Parent or Guardian Signature & Date: _____

2024 SCASC State Convention - Participant Commitment Form

Dear Parent or Guardian:

We are delighted that your student will be attending the annual state convention of the South Carolina Association of Student Councils, March 8-10, 2024, hosted by Spring Valley High School. Because we wish to ensure the safety of your child, as well as other participants, we have developed the following behavioral expectations.

All delegates are expected to:

- 1. Wear appropriate convention name badge throughout the convention.
- 2. Attend all sessions at the designated times and places.

3. Display the appropriate mode of attire and behavior that is representative of any student council position. Students may dress casually, but appropriately. They must not bring controversial clothing to the convention.

- a. Controversial clothing includes: spaghetti straps or strapless tops; short shorts; crop tops; cut out or frayed clothing; tank tops with extra-large arm and neck holes; clothing with ads for alcohol, tobacco, drugs, or with profanity, sexual pictures, or inference.
- b. Use of electronic devices (including cell phones, headphones, and hand-held games) is prohibited during any meeting, activity, or general session.
- c. Food, drink, portable speakers, noisemakers or throwing any object are prohibited in general session.
- 4. Respect the rights and safety of others. Students exhibiting irresponsible behavior that endangers the health,safety, or welfare of themselves or others will be sent home immediately at their expense. Students are expected to demonstrate respect towards other students, advisers, and presenters. Therefore, the following behavior will not be allowed: talking during presentations, interfering with delegate/staff members' ability to participate, or creating an intimidating, hostile, or offensive environment.
- 5. **Inform an adult if a problem arises.** The safety and well-being of all student delegates attending this convention is of the utmost importance. For this reason, if at any time during the convention an incident occurs that makes the student feel threatened or intimidated, he or she should tell an advisor or adult officer.
- 6. Be courteous to the Hotel Environment. As guests of our local hotels, you are required to follow all responsible requests or rules made by the hotel. Once students return to the hotel. In the evening, they are expected to stay in their own room. Girls CANNOT go into boys' rooms and boys CANNOT go into girls' rooms. Each school is responsible for their own transportation for the duration of the conference.
- 7. Understand that the use or possession of alcohol, tobacco products, or illegal drugs (including vaping, juuling and e-cigarettes) as well as the possession of any type of weapon, play or real, is strictly prohibited. Any student found possessing or under the influence of any illegal drug or alcohol, or possessing a weapon will be sent home immediately at his/her expense. SCASC will notify both the school principal and parents about the infraction.
- 8. **Respect the property of others.** Students are not to take objects from convention areas or any other property visited. Theft and vandalism will not be tolerated.

Violation of any of these expectations may result in your student being sent home at his/her expense. (Of course, we would much prefer that everyone have an exciting and safe convention!) We appreciate your support of your student's involvement in leadership development.

Your signatures below indicate that you have read and discussed the above guidelines with your student and are in agreement with these expectations. Thank you!

Parent/Guardian Signature

Student Signature

Parent/Guardian Name Printed

Student Name Printed

School Name

Principal's Signature

Please turn in this signed form with registration forms. (Advisors should keep a copy for their files)