

Texas FFA Convention Application

*July 8-12, 2024
Houston, Texas*

Due by Friday, May 10 at 4:00 p.m.
No late applications will be accepted.

Name: _____

Address: _____

Phone Number: _____

Classification (2023-24): _____

Email: _____

Parents' Name: _____

Parents' Contact Information: _____

Application Number: _____

Texas FFA Convention

The 2024 Texas FFA State Convention will be held in Houston, Texas. This is the culmination of the year's successes for all Agricultural Science programs statewide. Chapters from all corners of the state come to a designated location to celebrate, receive awards, compete, and learn. It is a rewarding experience for any student to attend and numbers are limited for attendance. The convention will be held **July 8-12, 2024**.

Any student that is receiving an award or is competing at the State FFA Convention will receive priority in any given year. If there are any spots still available, preference will be given to those that have earned their right to attend by attending meetings, participating in LDEs & CDEs, fundraising, District and Area meetings, and other FFA activities that have been held throughout the year. **Turning in an application does not guarantee a spot on the trip.**

At this time, we will be taking a maximum of 8 students this year. **Those intending to go will have to pay a one-time non-refundable deposit of \$150 which will cover activities for the week, convention registration, and their convention t-shirt.** Each student will be responsible for paying for his or her own trip (hotel, meals, registration, etc.). Any student who does not have their trip paid for by the deadline (June 30), will be dropped.

Each member who attends must have COMPLETE Official Dress to attend. That includes the FFA Jacket, tie/scarf, black pants/skirt, black closed-toe shoes, white collared shirt, and black socks/hose. All official FFA events require Official Dress including the Convention.

If you and your parents agree to the terms, then sign that you understand and will abide by all requirements.

Date: _____

Parent Name: _____

Parent Signature: _____

Student Name: _____

Student Signature: _____

Application Number: _____

MANOR FFA TEXAS FFA CONVENTION APPLICATION

Will you be receiving an award or participating in a contest at the convention? If so, what award or contest?

Yes

No

LDE Participation (Leadership Contests)

List each different contest that you have participated in during the current year. List all State, Area, & District Contests separately.

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

CDE Participation (Judging Contest)

List each different contest that you have participated in during the current year. List all State and Area Contests separately.

- | | |
|----------|-----------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | 10. _____ |

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SAE Participation

State your SAE involvement over the past 12 months. This includes all projects and shows.

1. _____	6. _____
2. _____	7. _____
3. _____	8. _____
4. _____	9. _____
5. _____	10. _____

Meeting Attendance

List any and all chapter, district, area, state, and national FFA meetings, conventions, and banquets that you have attended over the past 12 months.

1. _____	6. _____
2. _____	7. _____
3. _____	8. _____
4. _____	9. _____
5. _____	10. _____

Fundraising Opportunities

List any chapter fundraising activities that you have participated in during the past 12 months.

1. _____	6. _____
2. _____	7. _____
3. _____	8. _____
4. _____	9. _____
5. _____	10. _____

Application Number: _____

Other FFA Participation

List any other FFA activities that you have participated in that have not previously been mentioned.

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

Have you passed all classes during the 2023-2024 school year? Explain.

Do you have excessive (more than 10 unexcused absences) absences for the 2023-2024 school year? Explain.

Have you had any discipline issues/referrals for the 2023-2024 school year? Explain.

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Acknowledgement

I understand that I have expressed an interest in attending the Texas FFA Convention in Houston, Texas, July 8-12, 2024. I understand that I am responsible for paying for the trip myself and the school will provide the transportation to and from the convention. I must act responsibly while at the Convention as I am representing the school and my organization. I understand that failure to adhere to these responsibilities will result in consequences as outlined by MISD Administration. As an FFA member, I am willing to accept the responsibilities associated with this leadership activity and will strive to lead by example. My parents support me in this decision as I strive to be a leader for the 21st century.

Student Signature _____ Date _____

_____ has our complete approval and encouragement to attend the Texas FFA Convention if selected. We fully realize the additional time, money, and work required if my student is selected to attend.

Parent or Guardian Signature _____

Convention Expenses	
Hotel	\$214
Registration, Events, Shirt	\$146
TOTAL DUE TO AG. DEPT.*	\$360
<p>*This amount is an estimate and is subject to change. Cost of hotel or activities could increase if the number of students decreases. We will try our best to stay under the projected cost.</p> <p>A \$150 nonrefundable deposit will be required on June 1st. Students will be notified of attendance on/by Wednesday, May 15th.</p> <p>BALANCE IS DUE BY JUNE 30th. Checks should be payable to Manor FFA.</p> <p><i>This does not include extra spending money & meal money (approximately \$30/day). We will cover some of the meals during the day.</i></p>	



Application Number: _____

Ag Department Permission Slip Form



Rules and Procedures for School Sponsored Trips

1. Each student is expected to follow the directions given by the group sponsors at all times during the trip.
2. Each student is expected to remain with the group sponsor, unless granted permission to do so.
3. Each student is expected to refrain from damaging any property that does not belong to him/her. The student will be responsible for the damages whether intentional or unintentional.
4. All students are expected to conduct themselves with integrity and honor and represent Manor High School with pride.

Student Agreement:

I agree to follow all student expectations and accept all directions given by my sponsor. I will respect all chaperones and conduct myself in a manner that exemplifies honor for my school. I realize that I am under supervision of my sponsor at all times.

Student Signature: _____ Date: _____

Parental Consent and Medical Release:

Consent given _____, 20____, by _____ of
(Parent/Guardian)

_____ as _____ of _____.
(Address, City, State, Zip) (Parent/Guardian) (Name of Student)

I release Manor ISD, its employees, volunteers and officers from all claims, demands, and judgments for all person injuries, known or unknown, and from all property losses, real or personal, as an outcome of the above named trip. In some events, sponsors may need to transport students in personal vehicles.

I authorize medical treatment for the above named student in the event of an emergency while participating in the above named trip.

(Signature of Parent/Guardian) (Home Phone) (Work Phone)

Name of Insurance Company _____ Policy Number _____

This permission slip must be returned to your sponsor before leaving the school.
It must be signed by you and your parent.

Texas FFA State Convention
Houston, Texas • July 8-12, 2024

Application Number: _____

MANOR FFA MEDICAL AUTHORIZATION FORM

Name: _____ Home Phone: _____

Age: _____ Address: _____
Street City Zip

Parent/Guardian: _____
Last First

Father's Employer: _____ Phone: _____

Mother's Employer: _____ Phone: _____

Family Physician: _____ Phone: _____

Name of person to contact if parent or guardian is unavailable:

Name	Relationship	Phone
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List any medication you are presently taking: _____

List any known medical problems or allergies: _____

Medical Insurance Information	_____	_____
	Company Name	Name of Insured
	_____	_____
	Policy Number	Group Number

"In case of serious illness or accident, I request the activity sponsors contact me. If I cannot be reached, I herewith authorize contact of the physician indicated above. If it is not possible to contact the physician, I authorize the teacher/advisor to arrange for all necessary medical services for said child on my behalf."

Signature: _____
Parent/Guardian Date

Application Number: _____