

**2010 INTERNATIONAL CAREER DEVELOPMENT CONFERENCE
HIGH SCHOOL DIVISION
REGISTRATION AND INSURANCE SUMMARY**

Mail completed form to:

Mrs. Patricia Lamborne
NJ DECA – TSC #200G
c/o Middlesex County College
2600 Woodbridge Avenue
Edison, NJ, 08818

DEADLINE DATE: March 12, 2010

Make Checks Payable to: NJ DECA

Name of Chapter Advisor: _____ Advisor E-Mail Address: _____

Name of School/Chapter: _____

Advisor phone numbers (School): _____ (Home): _____

Instructions:

1. Registration fee is \$110.00 per person attending the conference. There is no charge for spouse or child registration. (However, if the spouse is also being considered a chaperone, the registration fee **must be paid**. There is to be one chaperone for every eight students, per DECA Inc. policy.)
2. Check, money order, or purchase order for the total number of persons registering is to be sent with all completed forms. Please make checks payable to: NJ DECA.
(If you are having trouble meeting this money requirement, please contact Patricia Lamborne immediately to make alternate arrangements. **DO NOT SEND IN YOUR WRITTEN MATERIALS AFTER THE DEADLINE DATE OF MARCH 12TH.**)
3. Only qualified participants are eligible to attend with their chapter advisor. No registration refunds will be granted by DECA Inc. after registration closes at 10:00 a.m. on April 24, 2010.

Students: \$110.00 registration X number attending _____ = \$ _____

Professionals and chaperones \$110.00 registration X number attending _____ = \$ _____

Spouses and/or family: \$ - 0 - registration X number attending _____

Total number attending conference: _____

Total Registration Fees: \$ _____

Insurance: \$1.50 per person X number taking insurance _____ = \$ _____

The students who qualify for competition at the International Career Development Conference are as follows from EACH of the TWO NJ DECA State Conferences:

- Individual Series Events – top three (3)
- ADC, ENP, ENW, FMP, TSE – top two (2)
- DECA Quiz Bowl – 1st Place Team
- BLTDM, BTDM, FTDM, HTDM, STDM, TTDM – top three (3) teams
- BOR, BMOR, FOR, HOR, SEOR – top two (2) teams
- CSP, CMP, EPP, FLPP, LEP, PRP, IBP, IMP – top two (2) projects
- CAP – top 10 per state
- SBE – Gold Level

Non-Competitors, including state officers, first and second place winners in Supermarket Careers and Customer Service, pin design and cover design winners, leadership academy participants, and FC2.

All on-line event winners.

**2010 INTERNATIONAL CAREER DEVELOPMENT CONFERENCE
HOUSING REQUEST FORM
HIGH SCHOOL DIVISION – LOUISVILLE, KENTUCKY
CONFERENCE DATES – APRIL 24 - 27, 2010**

Mail all conference and hotel registration forms to: DEADLINE DATE: March 12, 2010
Mrs. Patricia Lamborne **Make Checks Payable to: NJ DECA**
NJ DECA – TSC #200G
Middlesex County College
2600 Woodbridge Avenue PO Box 3050
Edison, NJ, 08818

1. Please print or type all information on these forms.
2. If you need more than one housing form, please duplicate this page.
3. All housing confirmations from the hotel will be sent to NJ DECA. If you have any questions about your accommodations, you must contact Patricia Lamborne.
4. If you need to cancel or add a person to a room, please contact Patricia Lamborne immediately.
5. All changes will go through the NJ DECA office ONLY.
6. In order to participate in the conference, all participants must stay in the designated hotel.

Name of School: _____

Name of Primary Chapter Advisor or Chaperone attending: _____

School Phone Number: _____ Fax: _____

Summary of rooms:

Single Rooms _____ X \$146.49 X #nights _____ = \$ _____

(one bed, one person)

Double Rooms _____ X \$146.49 X #nights _____ = \$ _____

(one bed, two people)

#Triple Rooms _____ X \$173.62 X #nights _____ = \$ _____

(two beds, three people)

#Quad Rooms _____ X \$173.62 X #nights _____ = \$ _____

Total # of Rooms _____

Please provide flight information: (If you do not have this information by the March 12th deadline, mail the required materials on time and contact Patricia Lamborne as soon as you know about your flight.)

Name of Airline: _____

Arrival Date: _____ **Time:** _____ **a.m. or p.m.** **Flight #:** _____

Departure Date: _____ **Time:** _____ **a.m. or p.m.** **Flight #:** _____