



ALL METRO COMPETITION!

Saturday, January 18th



When: Saturday, January 18, 2020, 8:00am – 3:00pm
Where: Millard SOUTH High School. 14905 Q St, Omaha, NE 68137
Why: A required competition for **ALL** students who want to participate in the STATE competition, March 19-20, Lincoln, NE.
What: One role-play event and one event/category test.

Cost: \$10.00
 Due 12/16/19

Medal and certificate awards for Top 8.

Business Attire required!

NAME _____

Payment Method (please circle):

CHECK # _____

CASH

Fundraising

Choose to compete in either ONE individual event, ...

- ACT Accounting Applications
- AAM Apparel & Accessories Marketing
- ASM Automotive Services Marketing
- BFS Business Finance
- BSM Business Services Marketing
- ENT Entrepreneurship
- FMS Food Marketing
- HLM Hotel and Lodging Management
- HRM Human Resource Management
- MCS Marketing Communication
- PFL Personal Financial Literacy
- QSRM Quick Serve Restaurant Management
- RFSM Restaurant & Food Service Management
- RMS Retail Merchandising
- SEM Sports & Entertainment Marketing

...OR choose ONE team decision making (TDM) event.

- BLTDM Business Law & Ethics
- BTDM Buying & Merchandising
- ETDM Entrepreneurship
- FTDM Financial Series
- HTDM Hospitality Services
- MTDM Marketing Management
- STDM Sports & Entertainment Marketing
- TTDM Travel & Tourism

Teammate's name:

PARENTAL PERMISSION AND RELEASE OF LIABILITY

Omaha Public Schools

This form must be completed (please print) and signed as a necessary prerequisite for participation in the below named activity.

We the undersigned, as parent(s) and guardian(s) of _____
(Student's name)

do hereby give permission for _____ to engage in the following activity.
(Student's first name)

Nebraska DECA's Metro Competition. Saturday, January 18, 2020, 8:00am-3:00pm. Due: Monday, December 16, 2019

Mode of transportation: Transportation to Millard South HS is the responsibility of the student. **Cost: \$10.00**

**In case parent or guardian cannot be reached in time of emergency contact:*

(Name of third party)

(phone No.)

We fully understand the nature of the activity(s) described above and the risk of injury or loss of property associated with that activity. The signing of this permission slip releases the school district and its employees from any claims made by the child or on behalf of the child should injury or loss of property occur as a result of his/her participation, except when either the school district or its employees are found negligent in the performance of responsibilities associated with the activity.

We acknowledge that we have read this **Permission and Release form** and fully understand its contents and the consequences of signing this form.

(Father)

(Guardian)

Home phone No./Business Phone No.

(Month) (Day) (Year)

(Mother) (Guardian)

Home phone No./Business Phone No.