FBLA Red Devils

Registration

$15

Application

*Please Print*

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade level:\_\_\_\_\_ Were you a paid member last year? Yes No

Cell phone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Text: Yes No

Race \_\_\_ African American \_\_\_ Hispanic \_\_\_ Asian

\_\_\_ American Indian \_\_\_ Caucasian \_\_\_ Other

Sex (Circle One) F M

As an FBLA member, I promise to follow the Mission of FBLA, support the goals of FBLA, abide by the code of ethics set by FBLA, and to uphold the FBLA Pledge.

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For Advisor Use Only:

Date: \_\_\_\_\_\_\_\_\_\_\_\_ Payment Type: \_\_\_\_\_\_\_\_\_\_ Check Num: \_\_\_\_\_



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