FBLA Competitor Identification Form

In the event that a competitor does not have an acceptable form of identification, this completed form will serve in that capacity for the National Leadership Conference. This form must be signed in the presence of either a school administrator or notary and validated by that individual.

Competitor	School Administrator
1) Fill out your information for the "Student Information" section.	1) You must place your seal and signature so it partially overlaps the student photo below.
2) Attach or print a photo in the designated area.	2) Watch the student sign the appropriate section of the form in your presence.
3) Sign where indicated in the presence of one of the officials indicated.	3) Sign the form in the appropriate section after the competitor completes their signature.

Competitor Information

Name
(must match NLC registration form)

LAST

FIRST   M.I.

Date of Birth

___ ___ / ___ ___ / ___ ___ ___ ___
MONTH   DAY   YEAR

School

SCHOOL NAME

CHAPTER NUMBER

CITY

STATE/PROVINCE   COUNTRY

Competitor Photo

Photo Requirements: A recent, head-and-shoulders photo of the competitor only, (no group photos).

Photo may be either digitally inserted or physically attached

School Administrator: You must place your seal and your ink signature so it overlaps a portion of the student's photo and the surrounding "white space".

Competitor Agreement

I certify that I am the person whose name, identifying information, and photo appear above and that I am signing this statement in the presence of either a school administrator or notary. I understand that, by signing this statement, if it is discovered that falsified information was provided, the above competitor and any other team members are subject to immediate disqualification, upon review of the infraction by the Competitive Events Committee.

COMPETITOR'S SIGNATURE *(only to be signed in the presence of the School Administrator or Notary)*   **DATE**

School Administrator
I certify that the above-named competitor is not my relative and has signed this form in my presence.

SCHOOL ADMINISTRATOR   **DATE**

NAME & TITLE *(please print)*

FBLA
Future Business Leaders of America