



# Region Culinary Events

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Georgia FCCLA  
Region  
Culinary Arts  
STAR Event

## Adviser Guide

- Region 1 – February 8
- Region 2 & 3 – February 7
- Region 4 – February 6
- Region 5 – February 5
- Region 6 – February 4
- Region 7 – February 2
- Region 8 – February 1
- Region 9 – January 31



The Culinary Arts Region Competitions will be held at various schools around Georgia.

Region	Date	Location
Region 1	February 8	North Cobb High School, Kennesaw
Regions 2 and 3	February 7	Madison County High School, Danielsville
Region 4	February 6	Fulton County College and Career Academy, Union City
Region 5	February 5	Arabia Mountain High School, Lithonia
Region 6	February 4	Newton College and Career Academy, Covington
Region 7	February 2	Houston County Career Academy, Warner Robins
Region 8	February 1	Wiregrass Georgia Technical College, Valdosta
Region 9	January 31	Woodville Tompkins High School, Savannah

### **Registration Information**

**Registration Costs:** \$20 per competitor, which is \$60 per team

**Registration Deadline:** Friday, January 11<sup>th</sup>

**Registration is all online:** <https://gafcccla.wufoo.com/forms/2019-region-culinary-star-event-registration/>

All Culinary Arts STAR Events participants are required to be affiliated and paid FCCLA members at the time of registration. Any participant not affiliated as an FCCLA member will not be eligible to compete at Region or State Culinary Arts STAR Event competitions.

#### Late Registration

- Per the Georgia FCCLA Policies and Procedures Manual, late registration is available up to 48 hours after the posted registration deadline.
- To register late, email [gafcccla@gmail.com](mailto:gafcccla@gmail.com).
- After 48 hours, no late registrations will be accepted.
- Late registration fees are \$40 per competitor, which is \$120 per team

### **Payment Information**

**Payment Deadline:** Wednesday, January 23<sup>rd</sup>

Any checks must be postmarked by Wednesday, January 23<sup>rd</sup> and sent to Georgia FCCLA, P.O. Box 840, Bogart, GA 30622.

Registration fee is \$20 per participant, which is \$60 per team, plus the cost of any butane rentals.

### **Tentative Agenda for Competition Day**

8:30 – 9:00 am	Registration
9:00 – 9:30 am	Orientation
9:30 – 10:00 am	Mise en place
10:00 am	Competition Begins

### **Competition Guidelines**

Georgia FCCLA Culinary Arts Guidelines can be found [HERE](#).

### **Equipment**

The following supplies and equipment will be provided by Georgia FCCLA:

- One table
- Protein for the competition (chicken breast)

The following supplies and equipment will be provided by the team:

- One speed rack (optional)
- Equipment needed for recipes
- Food for recipes (minus the protein)
- Maximum of 3 butane burners
- Note: This is not necessarily an exhaustive list, refer to the guidelines for other needed supplies

### **Equipment Rental**

There are options to rent butane burners (\$15) and butane canisters (\$5) through the registration system.

### **Multiple Release Forms**


Each adviser will have completed Multiple Release Forms for each participant. These forms will remain in the adviser's possession during the competition.

### **State Leadership Conference**

The State Culinary Arts STAR Event will take place during the State Leadership Conference, March 15-17 in Atlanta. The top two teams from each region (providing these teams reach silver medal status) will earn the right to compete at the State Leadership Conference in the Culinary Arts STAR Event. Stay tuned for more information about State Leadership Conference!

### **Questions?**

Contact Debra Stevens, Georgia FCCLA Culinary Consultant, at [dstevens7254@gmail.com](mailto:dstevens7254@gmail.com).

	<b>Culinary Arts Region STAR Event Checklist</b>
By January 11 <sup>th</sup>	Affiliate members
January 11th	<a href="#">Registration Deadline</a>
January 23 <sup>rd</sup>	Payment Deadline
Various Dates	Culinary Arts Region STAR Event Competitions
Questions?	Contact Debra Stevens at <a href="mailto:dstevens7254@gmail.com">dstevens7254@gmail.com</a>

Georgia FCCLA Multiple Release Form

School \_\_\_\_\_ Adviser \_\_\_\_\_

Please have student attendees and their parents/guardians read and complete this multiple-part form. Information about dress code and code of conduct is included on the Georgia FCCLA website meetings page: [www.gafccla.com](http://www.gafccla.com). Retain a copy for your records.

**TEACHERS, MEMBERS AND PARENTS: THERE ARE 17 LINES TO BE COMPLETED, PLEASE MAKE SURE TO SIGN ALL PORTIONS OF THE RELEASE FORM.**

**MEDICAL RELEASE/AGREEMENT TO ACCEPT FINANCIAL RESPONSIBILITY:** The undersigned, being the parent or guardian of \_\_\_\_\_ and having legal custody and who resides with me/us do give consent to any X-ray, examination, anesthetic, dental, medical or surgical diagnosis or treatment, and hospital care to be rendered to the minor under the general or special supervision and on the advice of any dentist, physician or surgeon licensed to practice in the State of Georgia or in a state on the itinerary of an activity sponsored by FCCLA I/we further agree that I/we will assume all expenses involved in such medical/ dental procedures and will not hold Georgia FCCLA or its representatives liable for said expenses.

List any medical/dental conditions that a medical doctor/dentist should be made aware of:

1 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any allergies that a medical doctor/dentist should be made aware of:

2 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Family Physician: Name 3 \_\_\_\_\_

Address 4 \_\_\_\_\_ Phone 5 \_\_\_\_\_

Parent's/Guardian's Signature 6 \_\_\_\_\_ Dated 7 \_\_\_\_\_

Emergency Contact Name 8 \_\_\_\_\_ Phone 9 \_\_\_\_\_

**LIABILITY:** The undersigned being the parent or guardian of student named above hereby agrees to release the Georgia Department of Education, Georgia FCCLA, its representatives, agents, servants, and employees from liability for injury to the said minor resulting from any cause whatsoever occurring to the said minor at any time while attending a conference or meeting of Georgia FCCLA, including travel to and from said meeting, excepting only such injury or damage resulting from the willful acts of such representatives, agents, servants, and employees.

Parent's/Guardian's Signature 10 \_\_\_\_\_ Dated 11 \_\_\_\_\_

**CODE OF CONDUCT AND DRESS CODE:** Students are to conduct themselves in accord with exemplary standards of ethics and behavior, including zero tolerance for any actions that violate any civil or criminal codes. Students found to be in violation of any laws, regulations or policies established for the FCCLA event they are attending will be subject to disciplinary action and prosecution. Their parents or guardians and school officials will be notified and must remove the student from the event. Dress is to reflect the FCCLA image and to follow guidelines for specific events. The Georgia FCCLA Dress Code is available online at [www.gafccla.com](http://www.gafccla.com). Reading and understanding completely the policies, practices, and procedures that will serve to govern the conduct and attire of persons attending an FCCLA event, I do hereby agree to follow said policies, procedures, and practices and abide by any consequences of any violations.

12 \_\_\_\_\_  
Signature of FCCLA Member Date

13 \_\_\_\_\_  
Signature of Parent/Guardian Date

**MEDIA RELEASE:** I release to the Georgia Department of Education and Georgia FCCLA the unlimited right to reproduce, copy, publish, or otherwise use in any reasonable way for any informational or educational purpose the following: Image (photo or video), Voice, Quote or written material.

14 \_\_\_\_\_  
Signature of FCCLA Member Date

15 \_\_\_\_\_  
Signature of Parent/Guardian Date

**SOCIAL MEDIA:** Georgia FCCLA respects the rights of its members to use social media. Members that use social media must remember that any information posted while attending a Georgia FCCLA event is reflective of the entire FCCLA community and, as such, is subject to the same behavioral standards set forth on the website. I will represent Georgia FCCLA in the best manner possible.

16 \_\_\_\_\_  
Signature of FCCLA Member Date

17 \_\_\_\_\_  
Signature of Parent/Guardian Date