



ILC Checklist

Registration is not complete without registering online (including family/guests wishing to attend any of the Awards Sessions) and receipt of **all** forms: **ILC Checklist, Registration Summary (not invoice), and Code of Conduct/Medical Liability Release Form (uploaded to <https://hosa.org/ilcforms/>)** – in addition to **full payment**. **All registration material for a chapter must be sent together in a complete and accurate manner. If you have any questions about properly submitting your school's registration, contact Mandy Memolo at mmemolo@flhosa.org.** Please use this checklist to assist with completing your school's registration accurately and mail to the State Office (address below) so that it is POSTMARKED by **May 22nd** or before.

Advisor Name _____ Advisor Cell Phone Number _____

Advisor E-mail Address _____

Lead Chaperone Name (if advisor is not attending) _____

Lead Chaperone Cell Phone Number (if advisor is not attending) _____

School _____ School Phone Number _____

- Watched the ILC Advisor Webinar from April 22nd
- This completed ILC Checklist
- The Chapter Advisor has reviewed the ILC Registration Summary individually with **all** registered members to verify proper entry in event and that **team members in an event all have the same team number before the online registration deadline of May 15th, 2026**; and all errors/omissions have been corrected prior to the deadline closing
- Online registration completed before deadline of **May 15th, 2026, including all parents/guests wishing to attend any of the Awards Sessions (no on-site registrations)**
- Copy of the **Registration Summary (not invoice)** – download from the Conference Registration Page on the Global/National HOSA system **after** you register; please refer to the ILC Advisor Webinar
- Uploaded signed HOSA Code of Conduct for each member **AND** Code of Ethics for Advisors/Chaperones and Family/Guests (if applicable) – please upload forms to <https://hosa.org/ilcforms/> – **do NOT send to Florida HOSA**
- Uploaded signed HOSA Medical Liability Release Form for each registrant (members, Advisors/Chaperones, and Family/Guests, if applicable) – please upload forms to <https://hosa.org/ilcforms/> – **do NOT send to Florida HOSA**
- Completed Student Accommodation Request Form for competitors in the events of Personal Care, Life Support Skills, Interviewing Skills, and Speaking Skills through the Global/National HOSA site via this link: <https://hosa.org/accommodations/> – **do NOT send to Florida HOSA**
- Payment (**check one**)
 - School Check
 - Money Order
 - Bank/Cashier's Check
 - Purchase Order/Check Request (# _____)
(if submitting a purchase order/check request, payment must still be postmarked by May 22nd to the Florida HOSA State Office.)
- By signing here _____ you, the local Chapter Advisor, certify that you have collected fully completed and signed conference participation forms (Code of Conduct/Ethics and Medical Liability Release Form) from all students, advisors/chaperones, and guests (if applicable) that are attending this conference **AND** have uploaded all forms to the Global/National HOSA website (<https://hosa.org/ilcforms/>). **You also understand that you are responsible and required to bring all original forms with you to the conference** in case of an emergency or event that would require their use, or, if you are not attending, you certify that you have given the forms to your designated Lead Chaperone(s) or Point of Contact(s) to bring to the conference.

Mail Fully Completed ILC Paperwork and Payment to:

**Florida HOSA State Office
3463 NW 13th Street, Suite B
Gainesville, FL 32609**

DO NOT SEND PAYMENT TO GLOBAL/NATIONAL HOSA IN SOUTHLAKE, TEXAS.

For Office Use Only

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