



Missouri TSA Chapter Assurance Form

The Missouri TSA members of _____ Chapter from _____ School District, along with their parents/guardians, have read and completed the 2021-2022 Medical Liability Release and Code of Conduct forms. These forms were received by the TSA Local Chapter Advisor and will be kept on file at the school district. The TSA Local Chapter Advisor will carry a copy of these forms with him/her at all TSA events.

In addition, we certify that all staff provided by the school district attending any TSA event have completed and passed a Criminal Background Check and are in good standing at the school district.

| | | |
|--------------------------------------|-----------------------------------|--------|
| _____ | _____ | _____ |
| (Local Chapter Advisor Printed Name) | (Local Chapter Advisor Signature) | (Date) |
| _____ | _____ | _____ |
| (School Administrator Printed Name) | (School Administrator Signature) | (Date) |

This form is to be submitted for each TSA event by the advertised due date. Local Chapter Advisors will not be allowed to register their chapter onsite without submission of this form.

INDIVIDUAL STUDENT FORMS MUST BE IN POSSESSION OF THE LOCAL CHAPTER ADVISOR.