

## WV HOSA Refund Policy

WV HOSA requires all affiliation and conference registration fees to be submitted by the published deadline as set by HOSA and/or WV HOSA. Once the respective conference registration deadline has passed, **all conference registration fees are non-refundable. Per HOSA, Inc Bylaws and Policies, affiliation application fees are non-refundable.**

WV HOSA is responsible for submitting payment to HOSA Future Health Professionals for all registered International Leadership Conference (ILC) attendees. Once the ILC registration deadline has closed, these fees cannot be reimbursed. (See *HOSA, Inc., Bylaws and Policies.*)

### Effective August 28, 2025:

All payments to WV HOSA for affiliation and/or conference fees must be submitted to WV HOSA via check or credit card by their school and/or county board of education. Payments for affiliation and conference registration fees will not be accepted from individual students, family members, and/or conference guests. In counties where advisors are required to pay their individual registration fees, payment will be accepted from said advisors via check and/or credit card. WV HOSA will no longer accept cash payments from chapters and/or advisors for conference registration.

\*\*Affiliation fees should be paid to:  
HOSA Future Health Professionals  
548 Silicon Drive, Suite 101  
Southlake, TX 76092.

Affiliation fees should only be sent to WV HOSA if the chapter's school or county board of education does not have HOSA Future Health Professionals as an approved vendor.

As the chapter advisor, I will ensure that all payments made to HOSA and/or WV HOSA for affiliation fees or conference registration fees will be in the form of a school check, county board of education check, and/or school or county board of education credit card. I understand that if my county requires me to pay my individual conference registration fee that payment must be submitted in the form of a check or credit card and that a cash payment will not be accepted for my conference registration fee.

I \_\_\_\_\_ have received, read, and understand this refund policy as set  
ADVISOR NAME

by WV HOSA Board of Directors.

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ADVISOR SIGNATURE

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DATE