



**Registrations by mail must be received by July 8.**

**Note: Register online through July 29 at [bit.ly/SASI-2024](https://bit.ly/SASI-2024).**

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Institution: \_\_\_\_\_

First Name (as should appear on badge): \_\_\_\_\_

*SHAPE America strives to create an inclusive environment for all attendees. To support knowing how to introduce and address one another, please select your identifying pronouns. We will be listing names, affiliations, and pronouns on name badges.*

**Select your identifying pronouns:**

- e/ey; em; eir; eirs; eirself
- he; him; his; himself
- [name]; [names]’s; [name]’s self
- per; pers; perself
- she; her; hers; herself
- sie; sir; hir; hirs; hirself
- they; them; their; theirs; themselves
- ve; ver; vis; vers; verself
- zie; zim; zir; zirs; zirself
- Please ask me about my pronouns.
- Other pronoun \_\_\_\_\_
- I’d prefer not to answer/list my pronouns on my badge.

**Job Title (check only one):**

- Administrator
- Athletic Director
- Athletic Trainer/Sports Medicine
- Coach
- Consultant
- Dance Educator
- Exercise/Fitness Instructor
- Health Ed Teacher
- PE Teacher
- PE/Health Ed Teacher
- Principal
- Professor
- Program Director/Agency
- Researcher
- Retired
- Student
- Teacher
- Teacher/Coach
- Other

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email (use personal email to ensure receipt): \_\_\_\_\_

SHAPE America Member  Yes  No Emergency Contact: \_\_\_\_\_ Emergency Contact Phone #: \_\_\_\_\_

Class Information (Students Only): College/University: \_\_\_\_\_ Professor’s Name: \_\_\_\_\_

Professor’s Email: \_\_\_\_\_

I will be presenting a session at the SHAPE America Summer Institute  Yes  No

Complementary t-shirts are guaranteed for the first 325 attendees who register by June 15. T-shirts are not guaranteed for registrations after June 15, and will be offered based on availability. Please select your size (all unisex adult sizes):  S  M  L  XL  XXL  XXXL

<b>REGISTRATION PRICES</b> <b>Registration Form must be received by July 8</b> <b>Note: Register online through July 29 at <a href="https://bit.ly/SASI-2024">bit.ly/SASI-2024</a>.</b>	<b>Event Registration</b> July 29 + July 30 (1/2 day)	<b>Add-On Workshop</b> July 30 (1/2 day)
SHAPE America Basic, Select, & Premier Professional, Institutional Professional Member, Retired, Emeritus, health. moves. minds.® Professional Member	\$249	\$99
SHAPE America Student*	\$109	\$99
Non-Member	\$299	\$99
Non-Member Student*	\$159	\$99
*Students must provide the name of their higher education institution, degree level, anticipated graduation year, and the name/email of a professor at the university.		



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**Health Education or Physical Education Workshop (You may select only one workshop.)**

Individuals attending **the workshop only, or both the conference and workshop**, please select one workshop below. If you are not attending the workshop, no response is necessary.

Implementing the Health Education Standards, \$99	
Implementing the Physical Education Standards, \$99	

<b>Housing</b>	<b>Cost</b>
Accommodation for the 2024 SHAPE America Summer Institute is available at the Hyatt Regency Minneapolis. Reserve your housing through our exclusive SHAPE America room block. All housing must be reserved by July 7 to be guaranteed the discounted SHAPE America rates: <a href="https://bit.ly/2024-SASI-Housing">bit.ly/2024-SASI-Housing</a> .	
<b>Single (king)</b>	\$199/night
<b>Double (two queens)</b>	\$199/night
<b>Triple</b>	\$224/night
<b>Quad</b>	\$249/night

**Special Accommodations**

Pursuant to the Americans with Disabilities Act, I require special accommodations at the event location. *Please indicate the type of accommodations below:*

- Auditory     
  Mobility     
  Visual

*Please provide details regarding your specific needs/requested accommodations:*

**Lunch will be included each day of the SHAPE America Summer Institute. Please indicate any special dietary needs or allergies:**

- Vegetarian     
  Gluten Free     
  Vegan     
  Kosher
- Other (please specify):     
  Allergic to (please specify):



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**Payment Information**

Payment or a copy of a purchase order must be provided at the time of registration to secure the current registration rate. Registration may also be completed [online](#). **Registrations via mail must be received by July 8, 2024. On-site registration will be accepted but is subject to availability.**

(Select Payment Method)

Credit:  VISA  MC  AMEX

*Please do not email your registration form with credit card information included.*

*Mail to: SHAPE America, PO Box 225, Annapolis Junction, MD 20701*

Event Registration (from page 1) \$ \_\_\_\_\_

Add-On Workshop (from page 2) \$ \_\_\_\_\_

**TOTAL PAYMENT (US funds only)** \$ \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Billing Address: \_\_\_\_\_

**Check payable to SHAPE America** (accepted by mail sent to the **Annapolis Junction, MD** address below or on-site only.)

A check must accompany the completed registration form. If the check is being sent by your employer, your name must be included on the check.

**Purchase Order** (accepted by mail by **July 8** or via email at [askmembership@shapeamerica.org](mailto:askmembership@shapeamerica.org) by **July 29**).

All invoices will be emailed directly to your Accounts Payable Department instead of being mailed. A purchase order (not just the purchase order number) must accompany the completed registration form.

List the email address and name of individual who should receive the invoice.

E-mail address Accounts Payable: \_\_\_\_\_

Name of individual to receive invoice \_\_\_\_\_

Registrations via mail must be received by July 8, 2024. After July 8, email ([askmembership@shapeamerica.org](mailto:askmembership@shapeamerica.org)) or submit onsite at staffed registration counter (subject to availability).

**ATTN:** SHAPE America, PO Box 225, Annapolis Junction, MD 20701  
**Direct questions to:** [askmembership@shapeamerica.org](mailto:askmembership@shapeamerica.org) | Phone: 800-213-7193



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## EVENT CODE OF CONDUCT ❁ CANCELLATION POLICY ❁ ATTENDEE DUTY OF CARE ❁ WAIVER

### Code of Conduct:

SHAPE America is committed to presenting an Institute that is fun, friendly, and informative for all participants. This includes creating an atmosphere that is harassment-free. All Institute participants are required to adhere to our [event code of conduct](#) for the duration of the SHAPE America Summer Institute at all venues and all Institute-related events, including social events.

### Cancellation Policy:

Cancellations must be submitted in writing to [askmembership@shapeamerica.org](mailto:askmembership@shapeamerica.org) and received **by July 12, 2024**. Summer Institute registration cancellations received on or before June 14, 2024, will be assessed a \$25 processing fee. Summer Institute registration cancellations received between June 15- July 12, 2024, will be assessed a \$75 processing fee. Refunds will not be granted for registration after July 12, 2024; however, substitutions will continue to be permitted.

### Substitution Policy:

- **On or before July 12, 2024:** A written substitution request must be emailed to [askmembership@shapeamerica.org](mailto:askmembership@shapeamerica.org) along with a copy of your confirmation and a completed registration form for your substitute.
- **After July 12, 2024:** Your substitute can bring your original confirmation on-site to the registration counter along with a completed registration form and the switch will be made at that time.

**Note:** If you paid the member rate, but your substitute is a non-member, the substitute will need to pay the difference in cost; however, if the substitute rate is lower than what you originally paid, you will not receive a difference in the price.

Cancelling or substituting your registration does not cancel your lodging. Please contact the hotel directly if you need to cancel your lodging.

### Attendee Duty of Care

SHAPE America recognizes the safety of attendees of the SHAPE America Summer Institute as a top priority. SHAPE America is committed to following Centers for Disease Control ("CDC"), Minneapolis, MN, federal and local government agencies, and the venue's COVID-19 health and safety guidelines for hosting in-person events. By attending the SHAPE America Summer Institute, each attendee agrees to comply with all COVID-19 health and safety guidelines adopted by SHAPE America as well as those guidelines that have been recommended by the CDC, Minneapolis, MN, federal and local government agencies, and the venue. SHAPE America may contact you again with further guidance and requirements pertaining to COVID-19 safety. Also, each attendee agrees to release and discharge SHAPE America and its affiliates, directors, officers, employees, and/or agents from any and all liabilities, damages, causes of action, claims, losses, expenses, and judgments as a result of its noncompliance with such guidelines as well as any transmission of COVID-19 in connection with the SHAPE America Summer Institute.

### Waiver

I agree and acknowledge that I am undertaking participation in the SHAPE America Summer Institute events and activities (Events) by my own free and intentional act, and I am fully aware that possible physical injury might occur to me as a result of my participation in these Events.

In consideration of being permitted to participate in these Events, I, on behalf of myself, my successors in interest, heirs, assigns, and representatives, hereby waive all rights of subrogation and fully release, waive, discharge, indemnify, and hold harmless the Society of Health



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and Physical Educators (SHAPE America) and its subsidiary and affiliated organizations, its officers, directors, agents, employees and representatives, successors and assigns (be they individuals or organizations, singly and collectively), together with their insurers (“Releasees”), from any and all claims, liabilities, damages, demands, suits or causes of action, which are in any way connected with my participation in the Events, including for any injury, damage, death, or other loss. THIS RELEASE OF LIABILITY IS EFFECTIVE AND VALID REGARDLESS OF WHETHER THE INJURY, DEATH, DAMAGE, OR OTHER LOSS IS A RESULT OF ANY NEGLIGENT ACT OR OMISSION ON THE PART OF RELEASEES.

I also agree not to allow any other individual to participate in my place unless authorized by SHAPE America through the substitution registration process identified above. SHAPE America may take photographs/screenshots/or video during the Events and reproduce them in SHAPE America educational, news or promotional material whether in print, electronic or other media, including the website. I authorize SHAPE America, or anyone authorized as a representative of SHAPE America, to take photographs, screenshots, and/or footage of me while I am at the Events, use my name and/or photographs/footage of me, which I have provided or are taken of me during the event period, to promote or advertise any SHAPE America fundraising program and/or event. I agree not to use any audio or video recording technology (including devices with digital camera functionality such as smartphones or tablets, and recording software, such as screen capture or similar software) during a presentation and not to record any presentation at the Events unless expressly permitted.

**IMPORTANT: Guests** under the age of 18 years are not allowed to attend this event. Guests over the age of 18 are required to complete a Policy/Waiver form at Registration to obtain a guest pass. The guest pass is valid for one day only, and the guest pass must be returned to the Registration counter at the end of the day.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_