



Future Professional's Workshop



Future Professional's Workshop Registration and Membership Form
Columbia College ♥ 1301 Columbia College Drive, Columbia, SC 29203

Saturday, February 23rd, 2019

Pre-Registration Deadline is February 21, 2019

****IN ORDER TO RECEIVE A T-SHIRT YOU MUST BE REGISTERED BY FEBRUARY 14, 2019****

****No refunds will be given after the pre-registration deadline****

Full Name: _____ **Date:** _____

Please complete the workshop information below. You do not have to be a member to attend this workshop

Work or School e-mail address

Complete Home Address:

Street address

City State Zip
Home :(_____) _____

School Address: _____
School/ Organization

Street address

City State Zip

T-Shirt Size (Circle One) S M L XL XXL

I am physically challenged and will need assistance.
SCAHPERD is not responsible for accidents or injuries that may occur during conference sponsored sessions/events.

We welcome your membership but you do not have to be a member to attend the workshop
MEMBERSHIP APPLICATION FORM
It is important that you complete all information requested.
 New Membership **Renewal of Membership**
 Future Professionals **\$18**

I select membership in the following associations(s) of SCAHPERD. Circle two numbers, indicating your first and second choices. You may select one association twice.

Students join Future Professionals and select areas of interest
Future Professionals of South Carolina
____ Dance ____ Health ____ Physical Education

Your e-mail address will never be sold, or shared with another organization or business. SCAHPERD plans to send as much information as possible by e-mail.

If you are unsure of the status of your membership, please contact Shannon Koch at SCAHPERD at the email address or number located to the right.

Workshop Registration Fee		
	Pre-Registration	Late/ Onsite
Future Professionals (college students)	\$20	\$25
Non-Members	\$30	\$35
Lunch will be provided on site	Free	
Membership Dues if applicable (optional) You do not have to be member to attend	\$18	\$18
Add a \$3.00 processing fee when using a credit card.		
Total (Form & Fees must be postmarked by deadline)		

Purchase Order Number: _____

Make Checks Payable to SCAHPERD Check Number: _____
Note: There will be a \$25.00 returned check fee.

Credit Cards Accepted: Visa Master American Express
Card Number: _____/_____/_____/_____ CVV Code: _____
Expiration Date: _____/_____/_____ Billing Zip Code: _____
****A \$3.00 credit card processing fee is added when using a credit card.****

Signature: _____

Mail Registration Form and Check To:

SCAHPERD
1301 Columbia College Drive
Columbia ♥ South Carolina ♥ 29203
Voice 803-786-3384 ♥ Fax: 803-786-3386
Email: SCAHPERD@columbiasc.edu
Website: www.scahperd.org

Or
Register by phone with Credit Card Call (803)786-3384