



Convention Registration

December 4 – 6, 2019

Kalahari Resort & Convention Center

Register online at www.OAHPERD.org until November 11, 2019
*Onsite registration will also be available**

	Pre-Registration by 11/01/2019	Registration 11/02/19 – 11/11/19
Professional Member:*	<input type="checkbox"/> \$140	<input type="checkbox"/> \$175
First-time Professional Member:*	<input type="checkbox"/> \$65	<input type="checkbox"/> \$95
Retiree, Honorary Life Member:*	<input type="checkbox"/> \$90	<input type="checkbox"/> \$115
Non-Member:*	<input type="checkbox"/> \$200	<input type="checkbox"/> \$225
Family Members:*	<input type="checkbox"/> \$90	<input type="checkbox"/> \$115
Student & Senior Student Member:*	<input type="checkbox"/> \$65	<input type="checkbox"/> \$90
Institutional Student Member:*	<input type="checkbox"/> \$55	<input type="checkbox"/> \$80
Qualifying Administrators**	<input type="checkbox"/> \$20	<input type="checkbox"/> \$20

Sponsor a Student (circle one) \$20/\$40/\$60/other _____

Recreation Therapy Institute \$50

Health Curriculum Workshop \$50

SUB-TOTAL \$ _____

**Qualifying administrators include: superintendents, curriculum directors, and other who are directly responsible for the district's health and physical education curriculum

*All categories above include admission to the All-Convention Kick-Off Social, the Thursday lunch (if noted), Friday continental breakfast, the All-Convention Social, and the presenter materials.

I would like to have a lunch provided by OAHPERD on Thursday, December 5

Yes

No

NOTE: If you do not choose an option above, you will not receive lunch.

***Note: Online Registration will end at midnight on November 11, 2019. Those who wish to register after this date must do so onsite.**

****There will be a \$10.00 increase to onsite registrations**

Convention questions or to verify current membership:
Call Jessica at 614-228-4705 or email
Jessica@Assnoffices.com

Registrant Information:

Name: _____

Preferred Address: _____

City/State/Zip: _____

Title: _____

School/Business: _____

Telephone: (____) _____

*Email Address: _____

***Must provide email for convention confirmation & for convention app login instructions**

- Mark this box if you are an active member or veteran of the U.S. military. Special recognition will be given to these members at the convention.
- OAHPERD Member Exp. Date _____
- Non-Member

Go to www.ohahperd.org to verify membership

Payment Made By: CASH CHECK MONEYORDER

CREDIT CARD: VISA MC DISCOVER AmEX

Name as it appears on card: _____

Card No: _____

3 or 4 digit security code on the back of card: _____

Exp. Date: _____ Signature: _____

Invoices and receipts can be printed directly from your membership profile at www.ohahperd.org. There will be a \$30.00 fee for all returned checks.

Make Checks Payable to: OAHPERD

Mail Registration to: OAHPERD Convention
 17 South High Street, Suite 200
 Columbus, OH 43215

Registration questions: Jessica@Assnoffices.com

REFUND POLICY: A full refund will be given for cancellations on or before November 2, 2019. Cancellations November 2 – November 12, 2019 will receive a 50% refund. No Cancellations after November 12!

Save Time and Paper! Online registration available at
www.OAHPERD.org until November 11, 2019