

2019 Annual HAPS Conference Registration Form

Name		Guest Name (if applicable)		E-mail Address	
Institution			Street Address		
City	State/Province	Zip Code	Phone Number		
I will need the following accommodations in order to participate: <input type="checkbox"/> Wheelchair access <input type="checkbox"/> Other _____					
Menu Options: <input type="checkbox"/> Regular <input type="checkbox"/> Vegetarian <input type="checkbox"/> Vegan <input type="checkbox"/> Other _____			What is the first HAPS Annual Conference you attended:		
Is this your FIRST HAPS Annual Conference? If so, you are invited to attend a FREE First Timers' Breakfast. Please CHECK IF YOU WILL ATTEND . <input type="checkbox"/> Yes <input type="checkbox"/> No			Is this your SECOND HAPS Annual Conference? If so, you are invited to attend a FREE Second Timers' Breakfast. Please CHECK IF YOU WILL ATTEND . <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you plan to retire in the next 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, do you give HAPS permission to announce this at the upcoming HAPS Conference? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Would you like to be added to the HAPS-L Physiology Discussion Group? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I'm already signed up!					
Would you like to be included on the electronic attendee list? This list will be distributed on the Conference App and given out to participating Exhibiting Companies. <input type="checkbox"/> Yes <input type="checkbox"/> No					
HAPS sends communications about the society via email. You must opt-in to receive communications about the society, including announcements from the President, conference details, election notices, etc. If you do not opt-in, you will receive no communications from the society. <input type="checkbox"/> Yes, I want to receive email communication from HAPS					
Late Rate Registration Prices <i>These are the rates available after 4/19/2019 and will be the on-site registration fee.</i>					
Registration Categories		Entire Conference	Update Seminar Only	Workshop Only	
Member – Regular		\$475 <input type="checkbox"/>	\$400 <input type="checkbox"/>	\$350 <input type="checkbox"/>	
Non-Member - Regular		\$585 <input type="checkbox"/>	\$510 <input type="checkbox"/>	\$460 <input type="checkbox"/>	
Undergraduate – Member		\$250 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$195 <input type="checkbox"/>	
Undergraduate – Non-Member		\$270 <input type="checkbox"/>	\$245 <input type="checkbox"/>	\$215 <input type="checkbox"/>	
Graduate Student – Member		\$260 <input type="checkbox"/>	\$235 <input type="checkbox"/>	\$205 <input type="checkbox"/>	
Graduate Student – Non-Member		\$290 <input type="checkbox"/>	\$265 <input type="checkbox"/>	\$235 <input type="checkbox"/>	
Post-doc - Member		\$270 <input type="checkbox"/>	\$245 <input type="checkbox"/>	\$215 <input type="checkbox"/>	
Post-doc - Non-Member		\$310 <input type="checkbox"/>	\$285 <input type="checkbox"/>	\$255 <input type="checkbox"/>	
Emeritus Member		\$360 <input type="checkbox"/>	\$305 <input type="checkbox"/>	\$260 <input type="checkbox"/>	
Guest		\$75 <input type="checkbox"/>	\$75 <input type="checkbox"/>	Guests cannot attend workshops	
Additional Options					
HAPS 2019 Conference Pin		\$7 Quantity _____			
FAX to 706.883.8215, e-mail to info@hapsconnect.org or send to: HAPS 251 S. L. White Blvd. LaGrange, GA 30241-2945 <input type="checkbox"/> A check is enclosed, payable to HAPS Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card # _____ Dollar amount to be charged to card US \$ _____.00 Exp. Date : _____ Verification Number : _____ Name on card: _____ Billing Address: _____			Total Payment Amount I would like to join HAPS or renew my dues (\$110 regular, \$90 contingent faculty/high school, \$20 Undergrad Student, \$30 Graduate Student, \$40 Post-doc, \$55 retired) \$ _____ Voluntary Donation to HAPS \$ _____ Total Payment \$ _____		

Conference Photo Consent

When you register for the HAPS Annual Conference, you affirmed that you agreed to allow HAPS photographers to record your participation and reproduce your likeness in publications, online, etc.

Speaker and Workshop Presentation Policy

HAPS cannot provide PowerPoint presentations or videos from Update Speakers or workshop presenters. If an attendee would like a copy of a speaker or presenters material, individuals should ask for materials directly from the speaker/presenter if they so desire. Photos and videos of presentations are forbidden without permission from that speaker/presenter. Please contact the HAPS Main Office with any questions you may have.