

2021 Annual HAPS Conference Registration Form – Late Rate Registration

Name		E-mail Address	
Institution		Street Address	
City	State/Province	Zip Code	Phone Number
What is the first HAPS Annual Conference you attended?			
Is this your FIRST HAPS Annual Conference? If so, you are invited to attend the First Timer's Event. Please <u>CHECK IF YOU WILL ATTEND.</u> ☐ Yes ☐ No		Is this your SECOND HAPS Annual Conference? If so, you are invited to attend the Second Timer's Event Please <u>CHECK IF YOU WILL ATTEND.</u> ☐ Yes ☐ No	
Do you plan to retire in the next 12 months? ☐ Yes ☐ No If yes, do you give HAPS permission to announce this at the upcoming HAPS Conference? ☐ Yes ☐ No			
Would you like to be added to the HAPS-L Physiology Discussion Group? ☐ Yes ☐ No ☐ I'm already signed up!			
Would you like to be included on the electronic attendee list? This list will be distributed to participating Exhibiting Companies. ☐ Yes ☐ 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. ☐ Yes, I want to receive email communication from HAPS			
REQUIRED: Please review the updated HAPS Social Media Policy (https://www.hapsweb.org/page/SocialMediaPolicy) and answer below: ☐ I have read the policy and agree to the terms ☐ I do not agree to the terms			
Late Rate Registration Prices			
Member – Regular		\$275 ☐	
Non-Member - Regular		\$385 ☐	
Undergraduate – Member		\$150 ☐	
Undergraduate – Non-Member		\$170 ☐	
Graduate Student – Member		\$175 ☐	
Graduate Student – Non-Member		\$205 ☐	
Post-doc - Member		\$200 ☐	
Post-doc - Non-Member		\$240 ☐	
Emeritus Member		\$200 ☐	
FAX to 706.883.8215, e-mail to info@hapseconnect.org or send to: HAPS 251 S. L. White Blvd. LaGrange, GA 30241-2945 ☐ A check is enclosed, payable to HAPS Credit Card: ☐ Visa ☐ MC ☐ American Express ☐ 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 presenter's 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.