

**HEALTH & PHYSICAL LITERACY SUMMIT PREREGISTRATION**  
**FEBRUARY 11 – 14, 2020**  
**HYATT REGENCY BIRMINGHAM – THE WYNFREY HOTEL**

**PLEASE PRINT CLEARLY – ALL FIELDS REQUIRED**

First & Last Names (no titles): \_\_\_\_\_

School/Work Affiliation: \_\_\_\_\_

Address (if paying by credit/debit card include billing address): \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**IMPORTANT INFORMATION:** 1-If you miss the **January 24<sup>th</sup> postmark** deadline, you may **pay the on-site** registration fees **upon arrival** at the Summit. 2-See details for **Purchase Orders** below-note the early deadline.

**SUMMIT REGISTRATION FEE:**

	<b>PREREGISTER BY JANUARY 24<sup>TH</sup> POSTMARK :</b>	<b>ON-SITE REGISTRATION:</b>	
Professional	\$ 130.00	\$175.00	\$ _____
Future Professionals*	\$ 45.00	\$ 65.00	\$ _____
Retired	\$ 45.00	\$ 45.00	\$ _____

\*Available to full time undergraduate and graduate students. K-12 teachers in graduate school do not qualify for Future Professional (Student) rate.

**CONTINUING EDUCATION CONTACT HOURS FOR CHES/MCHES:** \$20.00 \$ \_\_\_\_\_

**TOTAL PAYMENT:** \$ \_\_\_\_\_

**FORM OF PAYMENT: IF PAYING BY CREDIT CARD, YOU MUST INCLUDE YOUR BILLING ADDRESS AND EMAIL**

Check \_\_\_\_\_ (payable to ASAPERD)

Debit or Credit Card _____	Master Card _____	Expiration _____
	Visa _____	Expiration _____
	Discover _____	Expiration _____
	Am Ex _____	Expiration _____

Signature: \_\_\_\_\_ Date submitted: \_\_\_\_\_

**PURCHASE ORDER POLICY-EARLY DEADLINE:** If you are submitting a PO to ASAPERD for payment, **EMAIL the PO** and your pre-registration form no later than **January 17<sup>th</sup>** in order for an invoice to be sent to your bookkeeper allowing enough time for a check to be sent to ASAPERD by the preregistration deadline (January 24<sup>th</sup>). **Checks must be received in the ASAPERD office by the same deadline as other preregistration payments – January 24<sup>th</sup>**. If the check is cut but cannot be mailed in time to reach the Arley PO Box by January 24<sup>th</sup>, bring the check with you and pay the additional fee by check or credit card at the Summit. **Purchase orders are not accepted on site.**

**Refunds:** All requests for a full refund (minus a 10% service fee) must be made **no later than January 25<sup>th</sup>**. Requests between January 26<sup>th</sup> and February 5<sup>th</sup> will be refunded at 50%. No refunds will be granted after February 5<sup>th</sup> (exceptions may apply in cases of personal emergency). Contact Donna Hester ([dhester@asahperd.org](mailto:dhester@asahperd.org)).

**OFFICE USE ONLY**

Form of Payment \_\_\_\_\_  
Amount \_\_\_\_\_  
Date Processed \_\_\_\_\_  
Processed by \_\_\_\_\_

**Mail payment to: ASAPERD, PO Box 369, Arley, AL 35541**  
**by January 24, 2020**

**Questions? Contact Donna Hester 205-388-0304 M-F 9-4 or email [dhester@asahperd.org](mailto:dhester@asahperd.org)**  
**[www.asahperd.org/hpl-summit-2020](http://www.asahperd.org/hpl-summit-2020)**