Professional Membership APPLICATION FORM



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CONTACT INFORMATION	Customize Your Membership
	Please select the content areas most applicable
Name:	to your work and interests. Physical Education
School/Place of Employment:	SHAPE America Special Interest
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City/State/Zip:	Check all that apply.
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☐ Please check here if you are a National Board Certified Teacher.	Please check one. □ Administrator □ Nurse
☐ SHAPE America makes its membership mailing list available for rental to companies that feel SHAPE America members would benefit from the products and services they offer. If you don't want your name made available, please check the box.	☐ Athletic Director ☐ PE & Health ☐ Athletic Trainer Education Teacher ☐ Coach ☐ PE Teacher ☐ Consultant ☐ Principal ☐ Dance Educator ☐ Professor
SELECT YOUR MEMBERSHIP TYPE AND PAYMENT METHOD	☐ Education Admin ☐ Program Director ☐ Fitness Instructor ☐ Research
□ PREMIER Professional: All four journals included (2 print/4 online). □ SELECT Professional: one print and online journal included \$139/year □ BASIC ONLINE Professional: one online journal included \$79/year	 ☐ Health Ed Teacher ☐ Intramural Sports ☐ Sports Official ☐ Director ☐ Therapist Choose Your Professional Journals
Subscriptions to additional journals are only \$35 each per year	10 ppp p
Promo Code (if applicable): less \$ = TOTAL \$	JOPERD Agenda de Health
ANNUAL MEMBERSHIP PAYMENT OPTIONS	Education
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Name on Card:	Dance (JOPERD) American Journal of Health Education
Signature:	Research Quarterly for Exercise and Sport
* I authorize SHAPE America on an automatic basis annually to renew my membership and charge the applicable membership fees to the credit card submitted.	☐ Strategies: A Journal for Physical and Sport Educators

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