

Professional Membership APPLICATION FORM

5 EASY WAYS TO JOIN:

WEB: shapeamerica.org/membership
EMAIL: membership@shapeamerica.org

FAX: 703-476-9527
PHONE: 800-213-7193 or 703-476-3400

MAIL: SHAPE America, PO Box 17040,
Baltimore, MD 21298-8910

CONTACT INFORMATION


Name: _____
Job Title: _____
School/Place of Employment: _____
Address: _____
City/State/Zip: _____
Work Phone: _____
Email Address: _____
Home Address: _____
City/State/Zip: _____
Home Phone: _____

Preferred Mailing Address Business Home

Please check here if you are a National Board Certified Teacher.

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.

SELECT YOUR MEMBERSHIP TYPE AND PAYMENT METHOD

- PREMIER Professional:** All four journals included (2 print/4 online) **BEST VALUE**  **\$209/year**
- SELECT Professional:** one print and online journal included \$139/year
- BASIC ONLINE Professional:** one online journal included \$79/year

Subscriptions to additional journals are only \$35 each per year. \$ _____

TOTAL \$ _____

ANNUAL MEMBERSHIP PAYMENT OPTIONS

My check for membership is enclosed.

My purchase order is enclosed.

Charge my:   

Automatic membership payment*

One time payment

Card Number: _____ Exp. Date: _____ / _____

Name on Card: _____

Signature: _____

* I authorize SHAPE America on an automatic basis annually to renew my membership and charge the applicable membership fees to the credit card submitted.

Customize Your Membership

Please select the content areas most applicable to your work and interests.

- Physical Education Sport and Coaching
 Health Education Dance
 Physical Activity Research

SHAPE America Special Interest Groups (SIGs)

Check all that apply.

- Adapted PE/PA
 C/U PA Programs
 CSPAP Research
 C/U Curriculum & Instruction
 Diversity and Inclusiveness
 Education-Based Employee Wellness
 HPE State/District Administration
 Measurement & Evaluation
 Retirees
 Students

My Primary Responsibility is

Please check one.

- | | |
|-----------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Administrator | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> Athletic Director | <input type="checkbox"/> PE & Health Education Teacher |
| <input type="checkbox"/> Athletic Trainer | <input type="checkbox"/> PE Teacher |
| <input type="checkbox"/> Coach | <input type="checkbox"/> Principal |
| <input type="checkbox"/> Consultant | <input type="checkbox"/> Professor |
| <input type="checkbox"/> Dance Educator | <input type="checkbox"/> Program Director |
| <input type="checkbox"/> Education Admin | <input type="checkbox"/> Research |
| <input type="checkbox"/> Fitness Instructor | <input type="checkbox"/> Self-Employed |
| <input type="checkbox"/> Health Ed Teacher | <input type="checkbox"/> Sports Official |
| <input type="checkbox"/> Intramural Sports Director | <input type="checkbox"/> Therapist |

Choose Your Professional Journals



- Journal of Physical Education, Recreation and Dance (JOPERD)*
- American Journal of Health Education*
- Research Quarterly for Exercise and Sport*
- Strategies: A Journal for Physical and Sport Educators*

Join SHAPE America with confidence! Your satisfaction is 100% guaranteed. Cancel at any time within your first year, and you'll receive a full refund for the remaining months on your membership. For complete details regarding SHAPE America membership benefits, please visit us online at shapeamerica.org/membership or call 800-213-7193.