



**2022 ANNUAL MEETING & CONFERENCE REGISTRATION FORM**  
**SHERATON PANAMA CITY BEACH**  
**APRIL 5 - 9, 2022**  
**REGISTRATION FORM**  
 Agencies or organizations sending 5+ attendees qualify for a 10% conference discount.  
 Please call (866) 920-4660 to complete group registration.

Attendee's Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_

Phone \_\_\_\_\_

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

Are you a SGS member?     Yes  No      Have you ever attended a SGS Conference?     Yes  No  
 Are you a member of NAP-G (National Assoc. Professional Gerontologists)?     Yes  No  
 Are you a member of Sigma Phi Omega National Honors Society?                     Yes  No

**Which of these categories do you identify yourself with? (Choose One)**

- |                                                    |                               |         |
|----------------------------------------------------|-------------------------------|---------|
| Government/Public/Community Agency or Organization | Academia                      | Student |
| Non-Profit                                         | Private business (for-profit) | Retired |
| Other: _____                                       |                               |         |

**Which of the following best describes the over-arching service area you work in? (You may choose only ONE so please choose the one you spend the most time doing or use the "other" to fill-in a different area)**

- |                                                          |                                           |
|----------------------------------------------------------|-------------------------------------------|
| Health Care Delivery – home or residential setting       | Legal and/or Financial Services           |
| Health Care Delivery – hospital or office/clinic setting | Advocacy/Public Policy                    |
| Housing/Residential setting                              | Mental Health                             |
| Home & Community Based Services                          | Education/training/work force development |
| Not applicable (Retired or not working)                  |                                           |
| Other: _____                                             |                                           |

**Please tell us what profession you consider yourself? (Choose One)**

- |                                         |                                                  |
|-----------------------------------------|--------------------------------------------------|
| Nurse (RN,LPN, etc.)                    | Advanced Practice Nurse or Physician's Assistant |
| Physician                               | Marketing/Community Outreach                     |
| Public Policy                           | Social Worker/LPC/LMFT/Mental Health             |
| Counselor                               | Case Manager/Care Manager                        |
| Caregiver                               | Health or Human Services Program Manager         |
| OT/PT/Speech Therapist                  | Professor/Educator                               |
| Gerontologist                           | Rehabilitation professional                      |
| Business owner                          | Allied Health Professional                       |
| LTC/Residential services                | Lawyer/Legal services                            |
| Wellness/Activity specialist/Recreation | Patient Advocacy                                 |
| Student                                 |                                                  |
| Other: _____                            |                                                  |

**This year, we are working to connect mentors and mentees through interest keywords (i.e. caregiving, technology, housing, etc.). Please indicate what your interest areas are here.**

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**All SGS attendees, exhibitors, and guest will be required to provide one of the following to enter the SGS Conference.**

- Show proof of vaccination, such as a vaccine card or digital vaccine passport, indicating the attendee is fully vaccinated against COVID-19, or
- Show proof of a negative test result from a COVID-19 test obtained within three days of arrival at the conference venue

**By checking this box, you acknowledge that you understand these requirements and understand that refunds will not be provided for attendees that do not comply.**

## **REFUND POLICY**

SGS will implement a flexible refund policy for attendees this year. If you are experiencing any COVID-19 symptoms, have had exposure to COVID-19, or are simply uncomfortable traveling or attending, SGS will offer a full refund of your registration with notice. Please note that refunds will not be provided without notice. Notice can be provided by emailing Amanda James at [admin@southerngerontologicalsociety.org](mailto:admin@southerngerontologicalsociety.org). Refunds will not be provided for registrants who do not comply with the proof of vaccination/negative COVID-19 test requirement.

## REGISTRATION OPTIONS – EARLY BIRD (Deadline is 11:59 EST on March 1, 2022)

**Full Conference Registration – includes all days and evening events, all sessions, meals and all breaks on Tuesday, Wednesday, Thursday, Friday, and Saturday.**

*\*pre-conference trainings, excursions, or CEU admin costs are not included*

**Member: \$295**

**Non-Member: \$375**

**Student/Encore (Retiree) Member (not working full time) or unaffiliated Family Caregiver: \$175**

**Non-Member Student or Retiree: \$265**

### One-Day Registration

**Member: \$170**

**Non-Member: \$195**

**Student/Encore (Retiree) Member (not working full time) or unaffiliated Family Caregiver: \$75**

**Non-Member Student or Retiree: \$95**

## REGISTRATION OPTIONS – STANDARD (Begins March 2, 2022)

**Full Conference Registration – includes all days and evening events, all sessions, meals and all breaks on Tuesday, Wednesday, Thursday, Friday, and Saturday.**

*\*pre-conference trainings, excursions, or CEU admin costs are not included*

**Member: \$370**

**Non-Member: \$450**

**Student/Encore (Retiree) Member (not working full time) or unaffiliated Family Caregiver: \$225**

**Non-Member Student or Retiree: \$295**

### One-Day Registration

**Member: \$220**

**Non-Member: \$245**

**Student/Encore (Retiree) Member (not working full time) or unaffiliated Family Caregiver: \$125**

**Non-Member Student or Retiree: \$145**

CEU Processing Fee (CME, Contact Hours, and CEUs)	Additional Guest Tickets (single tickets gain access to President's Reception or Awards Luncheon)	Companion Event and Meal Pass (Guests are welcome to join all meals activities and evening events throughout the conference)
Flat Rate	Rate	Rate
<input type="checkbox"/> \$35	<input type="checkbox"/> \$50 per ticket	<input type="checkbox"/> \$135

**Total Payment Due:** \_\_\_\_\_ **Name on Card:** \_\_\_\_\_

<b>Credit Card#:</b>	
<b>Expiration:</b>	<b>CVV:</b>
<b>Billing Address:</b>	
<b>City, State:</b>	<b>Zip Code:</b>

**If you are paying by check, please send payment to:**

SGS  
PO Box 80786  
Conyers, GA 30013