

97th SCAHPERD Conference November 22-24, 2024 Kingston Plantation Myrtle Beach, South Carolina



## **Future Professionals 2024 Membership Application**

	☐ New Membership ☐ Renewal of Membership	
	<b>\$20.00 Future Professional Membership:</b> Any full-time graduate or undergraduate student of (HPERDFSAW)	
	<b>Note:</b> Graduate students can only hold an office in SCAFP if they join as a SCAFP member. If you want to join or hold an office in another SCAHPERD association, you must join that association as a professional member.	
	Graduation Year:	
	PLEASE PRINT CLEARLY	
Last Na	ame:First:	
Comple	lete Mailing Address:	
(Street)	)	
(City)_	(State)(Zip)	
Name o	of College/University you attend:	
College	e/University Complete Address:	
School	l or Cell Phone Number:	
Are you	ou a senior graduate? I joined SCAHPERD through the advice of:	
How wo	vould you like to receive The Alliance Newsletter from SCAHPERD? (Please check one)  Copy (US Mail) *Electronic Copy (Email)	
Your e- sold, or (E-mail	e-mail address is <i>important</i> for receiving information from SCAHPERD. Your e-mail address will never be r shared with another organization or business. <b>Please print clearly.</b> il address)	
*SCAHP	PERD plans to send as much information as possible by e-mail.	<u> </u>
Card #	Visa Master American Express Discover /	
	A three dollar (\$3.00) processing fee will be added when using a credit card.  Membership \$ + \$3.00 = \$ Signature	_
	Membership extends for 12 months from the first day of the month in which the dues are paid.  Amount of Check Check Number	
MAK	KE CHECKS OR MONEY ORDERS PAYABLE TO: SCAHPERD Contact Information:	
	<u>SCAHPERD</u> Voice: 803-575-2822	

Email: <a href="mailto:SCAHPERD@gmail.com">SCAHPERD@gmail.com</a>

www.scahperd.org

Mail application with dues to: SCAHPERD PO Box 445 White Rock, SC 29177