

# Retired Membership APPLICATION FORM



**Yes! I want to remain a valued member of SHAPE America — the nation’s premier professional community of health and physical educators.**

Dr.  Mr.  Ms.  Mrs. Name: \_\_\_\_\_

**Please Note: You must be, or have been, a member for at least 20 consecutive years, and fully retired from teaching in order to qualify for a Retired Membership.**

## 1 HOME ADDRESS

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

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

Home Phone: \_\_\_\_\_

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

Former Title: \_\_\_\_\_

Former Area of Employment: \_\_\_\_\_

Are/Were You a National Board Certified Teacher?  Yes  No

## 2 CUSTOMIZE YOUR MEMBERSHIP

Please select the content areas most applicable to your interests.

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

## 3 CHOOSE YOUR PROFESSIONAL JOURNALS

Retired membership includes online access to one professional journal. Subscriptions to additional journals are only \$35 each per year.

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

## 4 CALCULATE YOUR SHAPE AMERICA MEMBERSHIP DUES

**Retired Membership Annual Dues – \$59** \$ \_\_\_\_\_

Additional Professional Journals – \$35 each \$ \_\_\_\_\_

**TOTAL DUE** \$ \_\_\_\_\_



## 5 PAYMENT OPTIONS

My check for membership is enclosed.

Charge my:  VISA  MasterCard  AMERICAN EXPRESS

**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.

**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.**

**MAIL:** SHAPE America, PO Box 225, Annapolis Junction, MD 20701

**EMAIL:** membership@shapeamerica.org

**PHONE:** 800-213-7193, ext. 1490

**WEB:** shapeamerica.org