

2021 Annual Meeting & Conference Registration Form

Please fill out and return a hard copy of this form **AND WAIVER** only if you are paying by check. Please register only one person per form. This form may be duplicated or you may obtain additional forms at www.sswlhc.org. Faxed registrations are not accepted. Online registration with a credit card is strongly encouraged. **A \$5.00 check processing fee will apply to all check payments. Registrations will not be processed without payment.**

FIRST NAME / LAST NAME _____

TITLE _____

INSTITUTIONAL AFFILIATION _____

ADDRESS _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

EMAIL _____

GUEST NAME BADGE (WELCOME RECEPTION) _____

Vegetarian Meal Requested

First Time Attendee

(Please check here if this is your first SSWLHC Annual Conference. Includes free membership for one year, select member type below.)

- Regular Student
 Unemployed/Retired Associate
Emeritus

Special Assistance Required

(A SSWLHC staff member will contact you.)

Join and Register! Become a SSWLHC member today and register for the 2021 Meeting & Conference at the member price. Complete an online member application at <http://sswlhc.org/join/become-a-member/> to take advantage of the member discount.

Registration Fee Schedule - All Fees Payable in U.S. Dollars

CATEGORY	POSTMARKED BY AUGUST 7, 2021	POSTMARKED AFTER AUGUST 7, 2021
Member	<input type="checkbox"/> \$585	<input type="checkbox"/> \$705
Non-Member	<input type="checkbox"/> \$695	<input type="checkbox"/> \$825
Includes SSWLHC Membership through June 30, 2022		
Unemployed/Retired	<input type="checkbox"/> \$330	<input type="checkbox"/> \$380
Student Rate* (Full-time students only)	<input type="checkbox"/> \$330	<input type="checkbox"/> \$380
*Student discounts are available. Please call SSWLHC headquarters for details. **Students must submit a copy of their student ID with payment.		

Registration Fee \$ _____

Optional Pre-Conference Intensives

(Register for an intensive only or add one to your conference registration.)

- I-1: Leadership Institute (Sun & Mon 10/24-10/25, \$299)
 I-2: Pediatric Health Care Social Work Intensive (Mon 10/25, \$249)

Pre-conference Intensive \$ _____

Optional Day of Service Opportunities

Monday, October 25, 2021 12:30 - 2:30 PM PST

- Check here to register for the Volunteer activity - Ben's Bells
**See page 3 of program for details

Guest (Included in your fee. Additional attendees only.) Welcome Dinner at \$60 each \$ _____

Membership Renewal (Expiration 6/30/21)

- Regular at \$150 each
 Unemployed/Retired Emeritus at \$85
 Student at \$60
 Associate at \$200 each

Subtotal

\$ _____

Check processing fee + \$5.00

Total Amount Due

\$ _____

Payment Information

- Check or Money Order Enclosed
(All checks must be made payable to SSWLHC and in U.S. Dollars)
Tax ID # 23-3100897 DUNS# 962585829

Check Number: _____ Amount of Check: \$ _____

Contact Information

Toll Free Phone: (844) 957-7768 Email: info@sswlhc.org

Return this form with a check to:
SSWLHC, P.O. Box 175 Devault, PA 19432

SSWLHC COVID-19 Safety Acknowledgment Release, Waiver, and Assumption of Risk

COVID-19 SAFETY INFORMATION:

While participating in person at events held or sponsored by the Society for Social Work Leadership in Health Care ("SSWLHC"), including the 2021 Annual Conference ("the Activity"), "social distancing" must be practiced and face coverings worn at all times to reduce the risks of exposure to COVID-19. Because COVID-19 is contagious and is spread mainly from person-to-person contact, SSWLHC has put in place preventative measures to reduce the spread of COVID-19. However, SSWLHC cannot guarantee that its participants, volunteers, partners, or others in attendance at any SSWLHC events will not become infected with COVID-19. In light of the ongoing spread of COVID-19, individuals who fall within any of the categories below should not engage in SSWLHC events and/or other face to face fundraising activities. By attending an SSWLHC event, you certify that you do not fall into any of the following categories:

1. Individuals who currently or within the past fourteen (14) days have experienced any symptoms associated with COVID-19, which include fever, cough, and shortness of breath among [others - https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html); or
2. Individuals who believe that they may have been exposed to a confirmed or suspected case of COVID-19 or have been diagnosed with COVID-19 and are not yet cleared as non-contagious by state or local public health authorities or the health care team responsible for their treatment.

COMPLETED COVID-19 VACCINE SERIES OR RECENT NEGATIVE PCR OR ANTIGEN TEST:

Upon arrival at the Conference site, each individual must show proof of either a completed COVID-19 vaccine series OR a negative PCR or antigen test for COVID-19 conducted no earlier than three days before the Conference begins. If you fail to provide required documentation you will not be permitted to attend any conference sessions or events. A refund will not be issued if this occurs.

RELEASE AND WAIVER:

I hereby release, waive, and forever discharge any and all liability, claims, and demands of whatever kind or nature against SSWLHC and its affiliated partners and sponsors, including in each case, without limitation, their directors, officers, employees, volunteers, and agents (the "released parties"), either in law or in equity, to the fullest extent permissible by law, including but not limited to damages or losses caused by the negligence, fault or conduct of any kind on the part of the released parties, including but not limited to death, bodily injury, illness, economic loss or out of pocket expenses, or loss or damage to property, which I, my heirs, assignees, next of kin and/or legally appointed or designated representatives, may have or which may hereinafter accrue on my behalf, which arise or may hereafter arise from my participation with the activity, including in person events such as the 2021 SSWLHC Conference.

ASSUMPTION OF THE RISK:

With my registration for the 2021 SSWLHC Conference, I acknowledge and understand the following:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist;
2. I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID-19, even if arising from the negligence or fault of the Released Parties; and
3. I hereby knowingly assume the risk of injury, harm and loss associated with the Activity, including any injury, harm and loss caused by the negligence, fault or conduct of any kind on the part of the Released Parties.

As a participant, volunteer, or attendee, I recognize that my participation, involvement and/or attendance at any Society for Social Work Leadership in Health Care event or activity ("Activity") is voluntary and may result in personal injury (including death) and/or property damage. By attending, observing, or participating in the Activity, I acknowledge and assume all risks and dangers associated with participation and/or attendance at the Activity, and I agree that:

(a) the Society for Social Work Leadership in Health Care (b) the property or site owner of the Activity, and (c) all past, present and future affiliates, successors, assigns, employees, volunteers, vendors, partners, directors, and officers, of such entities (subsections (a) through (c), collectively, the "Released Parties"), will not be responsible for any personal injury (including death), property damage, or other loss suffered as a result of your participation in, attendance at, and/or observation of the Activity, regardless if any such injuries or losses are caused by the negligence of any of the Released Parties (collectively, the "Released Claims"). Participants at the 2021 Conference agree to comply with all safety measures required by Loews Hotels, the State of Arizona, and the CDC, as they exist at the time of the Conference. Failure to comply with those safety measures may cause SSWLHC to remove participants from the Conference, without refund.

Link to Loews Safety Measures: https://cdn.loewshotels.com/loewshotels.com-2466770763/cms/pressroom/a_032921_loews_hotels_safety_protocols.pdf

Link to Arizona Tourism/CDC:

<https://tourism.az.gov/covid-19-updates-2/>
<https://directorsblog.health.azdhs.gov/>

BY CHECKING THIS BOX, I AM ACKNOWLEDGING THAT I HAVE READ THE ABOVE SAFETY ACKNOWLEDGEMENT, RELEASE, WAIVER, AND ASSUMPTION OF RISK. I ACKNOWLEDGE AND UNDERSTAND THAT THIS AGREEMENT AFFECTS MY LEGAL RIGHTS.

Participant Initials

Participant Name Printed

Date