



MNSHAPE Membership Form

(or register online at www.mnshape.org)



Name (first, middle, last) _____

Home Address _____

Home City _____ State _____ Zip _____

Home Telephone _____

Work Address _____

Work City _____ State _____ Zip _____

Work Telephone _____

Email Address _____

of years in HPERD Profession _____

Areas of responsibility (circle all that apply): Advocacy, Agencies, Aquatics, Athletics, Curriculum, Dance, DAPE, Exercise Science, Health, Recreation, Retired, Physical Education, Sport Management, Other: _____

Level of responsibility (circle one): Community College/ University, Early Childhood, Elementary, Middle School/Junior High, High School

Membership Categories (select one)

- \$40.00 Professional Member
- \$30.00 JRH/HFH Coordinator (\$10 discount for professional membership coordinators)
- \$25.00 Student Member - College attended full -time : _____
- \$25.00 Retired Member - Year Retired: _____
- \$40.00 Associate Member
- \$800 Lifetime Member

Payment Method

- Personal Check (Make check payable to MNSHAPE)
- Institutional Check (Make check payable to MNSHAPE)

Mail to:

Nancy Christensen
25673 Muskrat Lake Drive
Detroit Lakes, MN 56501

218-847-9769 (Home Phone)
218-846-2416 (Fax Number)

Questions: Call Nancy Christensen at 218-847-9769 or email nancy1485@gmail.com