

GGG 2023 Annual Conference Registration Form

Please provide the following information as you would like it to appear on your name tag:

Name:

Pronouns (e.g., she/her, he/him, they/them):

Organization:

Position / Title:

Attendee Contact Information

Address:

Email:

Primary Phone:

Cell Phone:

If meeting planners have questions in advance or during the meeting, the best way to reach me is: _____

CONFERENCE ACCESSIBILITY

GGG endeavors to provide inclusive and accessible programming for all. Please let us know what you will need to successfully participate in our Annual Conference. Certain accommodations require more time to fulfill, so please give us ample time to do so. *For non-dietary accommodations, email Sarah at administrator@georgiagerontology.org in addition to filling out the form. Put "conference accommodations" in the email subject line.*

Communication formats/aids:

- None – I do not need any modifications to participate
- Closed captioning
- Assistive listening device (e.g., "pocket talker")
- Other types of interpreting (please specify): _____

Materials provided in:

- Large print
- Braille
- Electronic files (formats may include PDF, Word, Text, and Excel)
- Other _____

I will need a "handicap-accessible" parking space: YES No

I use the following assistive mobility device(s): _____

I will be accompanied by a service animal: YES No

Type of service animal: _____

I will be accompanied by a personal assistant: YES No

I have the following dietary restrictions:

- | | |
|--|---|
| <input type="checkbox"/> None | <input type="checkbox"/> Fish |
| <input type="checkbox"/> Vegetarian | <input type="checkbox"/> Shellfish |
| <input type="checkbox"/> Vegan | <input type="checkbox"/> Peanuts |
| <input type="checkbox"/> Kosher | <input type="checkbox"/> Tree Nuts |
| <input type="checkbox"/> Sugar-free | <input type="checkbox"/> Seeds (Sesame, Poppy, Sunflower) |
| <input type="checkbox"/> Gluten/Wheat/Oats | <input type="checkbox"/> Tomatoes |
| <input type="checkbox"/> Dairy/Casein | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Soybeans | _____ |
| <input type="checkbox"/> Eggs | _____ |
| <input type="checkbox"/> Beef | |

Other accommodations needed: _____

GGG MEMBERSHIP

Are you a GGS member? Yes No

You can become a GGS member at www.georgiagerontologysociety.org. Your membership must be current during the conference to maintain the member discount. If your membership expires between the time of your registration and the conference, you will be required to pay the difference if you do not renew your membership.

ATTENDEE INFORMATION

Is this your first GGS Conference? Yes No

- If yes, would you like to be assigned a conference mentor to assist you with meeting others in the aging network and getting the most out of your conference experience? Yes No
- If no, are you willing to serve as a GGS Conference Mentor to a first-time attendee? Yes No

Which of these categories do you identify yourself with?

PLEASE ONLY CHOOSE ONE CATEGORY (choose the category in which you spend most of your time).

- | | |
|---|--|
| <input type="checkbox"/> Government / Public / Community Agency or Organization | <input type="checkbox"/> Student |
| <input type="checkbox"/> Academia | <input type="checkbox"/> Business (For-Profit) |
| <input type="checkbox"/> Non-Profit | <input type="checkbox"/> Retired |
| | <input type="checkbox"/> Other: _____ |

Which of the following best describes the over-arching service area in which you work?

PLEASE ONLY CHOOSE ONE CATEGORY (choose the area in which you spend most of your time).

- | | |
|---|--|
| <input type="checkbox"/> Health Care Delivery—Home or Residential Setting | <input type="checkbox"/> Advocacy / Public Policy |
| <input type="checkbox"/> Housing / Residential Setting | <input type="checkbox"/> Home & Community Based Services |
| <input type="checkbox"/> Hospital or Office / Clinic Setting | <input type="checkbox"/> Mental Health |
| <input type="checkbox"/> Legal / Financial Services | <input type="checkbox"/> Not applicable (Retired or Not Working) |
| <input type="checkbox"/> Education / Training/ Work Force Development | <input type="checkbox"/> Other: _____ |

Please tell us what profession you consider yourself. CHOOSE ONLY ONE

- | | |
|--|---|
| <input type="checkbox"/> Advanced Practice Nurse / Physician's Assistant | <input type="checkbox"/> Legal Services / Lawyer |
| <input type="checkbox"/> Activity specialist / Recreation / Wellness | <input type="checkbox"/> LTC / Residential Services |
| <input type="checkbox"/> Allied Health Professional | <input type="checkbox"/> Mental Health Counselor |
| <input type="checkbox"/> Business (For Profit) | <input type="checkbox"/> Nurse (RN / LPN / NP) |
| <input type="checkbox"/> Caregiver | <input type="checkbox"/> Patient Advocacy / Public Policy |
| <input type="checkbox"/> Community Outreach / Marketing | <input type="checkbox"/> Physician / Geriatrician |
| <input type="checkbox"/> Financial Services | <input type="checkbox"/> Professor / Educator / Gerontologist |
| <input type="checkbox"/> Health / Human Services Program Manager | <input type="checkbox"/> Psychologist |
| | <input type="checkbox"/> Social Worker / LPC / LMFT |
| | <input type="checkbox"/> Other: _____ |

Please identify the coverage area in which you work or where you live if you are not currently working. You may choose more than one option if you cover more than one area.

- | | | |
|---|--|--|
| <input type="checkbox"/> Central Savannah River | <input type="checkbox"/> Middle Georgia | <input type="checkbox"/> Southwest Georgia |
| <input type="checkbox"/> Coastal Georgia | <input type="checkbox"/> Northeast Georgia | <input type="checkbox"/> Three Rivers |
| <input type="checkbox"/> Georgia Mountains | <input type="checkbox"/> Northwest Georgia | <input type="checkbox"/> All Regions |
| <input type="checkbox"/> Heart of Georgia | <input type="checkbox"/> River Valley | <input type="checkbox"/> Out of State |
| <input type="checkbox"/> Metro Atlanta | <input type="checkbox"/> Southern Georgia | |

REGIONS BY COUNTY

Metro Atlanta: Cherokee, Clayton, Cobb, DeKalb, Douglas, Fayette, Fulton, Gwinnett, Henry, Rockdale

Coastal Georgia: Bryan, Bullock, Camden, Chatham, Effingham, Glynn, Liberty, Long, McIntosh

Central Savannah River Area: Burke, Columbia, Glascock, Hancock, Jefferson, Jenkins, Lincoln, McDuffie, Richmond, Screven, Taliaferro, Warren, Washington, Wilkes

Heart of Georgia: Appling, Bleckley, Candler, Dodge, Emanuel, Evans, Jeff Davis, Johnson, Laurens, Montgomery, Tattnall, Telfair, Toombs, Treutlen, Wayne, Wheeler, Wilcox

Georgia Mountains: Banks, Dawson, Forsyth, Franklin, Habersham, Hall, Hart, Lumpkin, Rabun, Stephens, Towns, Union, White

Middle Georgia: Baldwin, Bibb, Crawford, Houston, Jones, Monroe, Peach, Pulaski, Putnam, Twiggs, Wilkinson

Northeast Georgia: Barrow, Clarke, Elbert, Greene, Jackson, Jasper, Madison, Morgan, Newton, Oconee, Oglethorpe, Walton

Northwest Georgia: Bartow, Catoosa, Chattooga, Dade, Fannin, Floyd, Gilmer, Gordon, Haralson, Murray, Paulding, Pickens, Polk, Walker, Whitfield

River Valley: Chattahoochee, Clay, Crisp, Dooly, Harris, Macon, Marion, Muscogee, Quitman, Randolph, Schley, Stewart, Sumter, Talbot, Taylor, Webster

Southern Georgia: Atkinson, Bacon, Ben Hill, Berrien, Brantley, Brooks, Charlton, Clinch, Coffee, Cook, Echols, Irwin, Lanier, Lowndes, Pierce, Tift, Turner, Ware

Southwest Georgia: Baker, Calhoun, Colquitt, Decatur, Dougherty, Early, Grady, Lee, Miller, Mitchell, Seminole, Terrell, Thomas, Worth

Three Rivers: Butts, Carroll, Coweta, Heard, Lamar, Meriwether, Pike, Spalding, Troup, Upson

GGS Full Conference Registration

July 24-26, 2023

Early Bird Rates Before June 04, 11:59 PM		Regular Rates Begins June 05, 12:00 AM	
<input type="checkbox"/> GGS Member	\$320	<input type="checkbox"/> GGS Member	\$360
<input type="checkbox"/> Non-GGS Member	\$370	<input type="checkbox"/> Non-GGS Member	\$420
<input type="checkbox"/> Student/Retiree (Not working full-time)	\$210	<input type="checkbox"/> Student/Retiree (Not working full-time)	\$250
<input type="checkbox"/> Family Caregiver	\$210	<input type="checkbox"/> Family Caregiver	\$250
<input type="checkbox"/> Presenter Rate (Student/Retiree)	160	<input type="checkbox"/> Presenter Rate (Student/Retiree)	\$200
<input type="checkbox"/> Presenter Rate (Professional)	\$270	<input type="checkbox"/> Presenter Rate (Professional)	\$310

One Day Registration

Tuesday, July 25, 2023 ONLY

All programs 7:30 AM through 7:00 PM

Early Bird Rates Before June 04, 11:59 PM		Regular Rates Begins June 05, 12:00 AM	
<input type="checkbox"/> GGS Member	\$195	<input type="checkbox"/> GGS Member	\$245
<input type="checkbox"/> Non-GGS Member	\$220	<input type="checkbox"/> Non-GGS Member	\$270
<input type="checkbox"/> Student/Retiree (Not working full time)	\$110	<input type="checkbox"/> Student/Retiree (Not working full time)	\$160
<input type="checkbox"/> Family Caregiver	\$110	<input type="checkbox"/> Family Caregiver	\$160

CONFERENCE EXTRAS

- **Guest Tickets for the July 25th Awards and Annual Meeting Luncheon**

If you are registered for the conference for that day, you do not need a ticket. These are luncheon tickets for guests.

Early Bird Rates Before June 04, 11:59 PM	Regular Rates Begins June 05, 12:00 AM
<input type="checkbox"/> \$110	<input type="checkbox"/> \$120

▪ **CERTIFICATE OF ATTENDANCE**

The certificate lists the hours attended, event dates, and location. It is not a substitution for the CEU certificate.

Early Bird Rates	Regular Rates
Before June 04, 11:59 PM	Starts June 05, 12:00 AM
<input type="checkbox"/> \$15	<input type="checkbox"/> \$20

▪ **CEU Processing**

We will list all approved CEUs on our conference website. We are applying for Social Work, Certified Case Manager, and Registered Dietitian. If we are not approved, you may request a refund by July 09, 2022. If you are requesting CEUs from more than one approving organization, you will need to pay the fee for each. You must submit the evaluation form to receive CEUs.

Early Bird Rates	Regular Rates
Before June 04, 11:59 PM	Starts June 05, 12:00 AM
<input type="checkbox"/> \$25	<input type="checkbox"/> \$30

Total Payment Due: _____

REGISTRATION INSTRUCTIONS

PAYMENT OPTIONS - Individuals wishing to pay by credit card, can register online by clicking [here](#). You need a PayPal account to use the online link. If you would like to print the form and pay by check or need to request an invoice, please contact Sarah Jones at administrator@georgiagerontologysociety.org or (210) 698-2074. A mailing address will be provided.

GROUP DISCOUNT - Agencies/Organizations that register 4 or more individuals can receive a 10% discount on their registration. This discount can only be applied if payment is submitted via check or direct deposit. If you are registering online, you will not be able to take advantage of this discount.

A special online registration link will be provided to the main contact person to be distributed to the persons attending the conference under this arrangement. Each individual must fill out and submit the link to be included on the registration list for a name tag, food allergies, and special accommodations.

REFUND POLICY - If you need to cancel your registration, the cancellation must be made in writing via mail or email by midnight on June 30, 2023. You will be charged a \$35 cancellation fee. No refunds will be given after June 30, 2023. You will be able to transfer a registration to another individual until midnight on July 18, 2023. Contact Sarah at administrator@georgiagerontologysociety.org if you make a registration transfer.