

# REGISTRATION/2024

## 34th Annual Art & Science of Health Promotion Conference

34th Annual  
**ART & SCIENCE**  
of Health Promotion Conference

### Attendee Information (Please print clearly.)

Attendee ID#           Phone     -        ☐ Business ☐ Home ☐ Mobile

Full first name \_\_\_\_\_ M.I. \_\_\_\_\_ Last name \_\_\_\_\_

Organization \_\_\_\_\_ Title \_\_\_\_\_


Mailing address \_\_\_\_\_ ☐ Business ☐ Fund ☐ Home

City \_\_\_\_\_ State/Province   Country    ZIP/Postal code

Attendee email \_\_\_\_\_

Badge name (first name) \_\_\_\_\_ Badge title \_\_\_\_\_

Credentials (e.g., M.P.H., Ph.D., R.N.) \_\_\_\_\_

 Special assistance—specify \_\_\_\_\_

Special dietary requirements—specify \_\_\_\_\_

### Bill to Information

Bill to contact will receive a copy of the invoice and hotel information for this registration.

Bill to contact \_\_\_\_\_ Email \_\_\_\_\_

Bill to organization ID#           Bill to organization name \_\_\_\_\_

### 34th Annual Art & Science of Health Promotion Conference | Hilton Head Island, South Carolina

#### Intensive Training Seminars—Monday-Tuesday, April 8-9, 2024

	Through November 30, 2023	November 30, 2023-February 26, 2024	After February 26, 2024
Registration fee (24A4PC)	<input type="checkbox"/> \$550	<input type="checkbox"/> \$575	<input type="checkbox"/> \$675
Select Seminar (required):			
<input type="checkbox"/> Applied Improvisation: Skills-Based Training for Health Promotion Leaders (ITS01)			
<input type="checkbox"/> Multi-Level and Multi-Cultural Resilience—Train the Trainer for Health Promotion Leaders (ITS02)			
<input type="checkbox"/> Evaluating and Communicating Best-In-Class Workplace Health and Well-Being Programs (ITS03)			
<input type="checkbox"/> Well-Being Leader Essentials: Transform How You Think, Act and Lead (ITS04)			

#### Core Conference—Wednesday-Friday, April 10-12, 2024

	Through November 30, 2023	November 30, 2023-February 26, 2024	After February 26, 2024
Full Three-Day Conference (24A4)	<input type="checkbox"/> \$875	<input type="checkbox"/> \$895	<input type="checkbox"/> \$995
Single-Day Conference	<input type="checkbox"/> \$450	<input type="checkbox"/> \$475	<input type="checkbox"/> \$575
Select Day: <input type="checkbox"/> Wednesday (24A4W) <input type="checkbox"/> Thursday (24A4T) <input type="checkbox"/> Friday (24A4F)			

Your registration fee includes access to all of the conference sessions, the exhibit area, continental breakfasts, receptions and conference materials.

### Continuing Education (CE) Credit

The International Foundation will apply for CE credit based on requests indicated below.

☐ AAFP ☐ ACSM ☐ CDR ☐ CHES/MCHES ☐ NBHWC ☐ Nursing ☐ HRCI ☐ SHRM

CHES ID# (required for CHES/MCHES requests) \_\_\_\_\_

**NOTE: Requests made for CE credit on this form do not guarantee administration of credit.**

### CEBS Compliance

☐ **CEBS Compliance**—Visit [www.cebs.org/compliance](http://www.cebs.org/compliance) for additional information.

Registration continued on next page

## Hotel

**The Hilton Beachfront Resort and Spa—Hilton Head Island, South Carolina** (\$229 single/double) Reservation deadline is **March 18, 2024**.

*Hotel reservations must be made directly with The Hilton Beachfront Resort and Spa. Please contact them at (843) 686-8400. Mention the Art & Science of Health Promotion Conference to receive the conference rate until March 18, 2024.*

## Registration Summary

Intensive Training Seminar fee	US\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Core Conference fee	US\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Discount	US\$	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total funds (U.S. funds)</b>	<b>US\$</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Payment Must Accompany Order

**Cancellation fees apply. Make check payable to International Foundation.**

☐ I understand and agree to all the International Foundation policies listed at [www.ifeb.org/policies](http://www.ifeb.org/policies). (Required to register.)

☐ Check #  \$

☐ Credit card #                 Exp. date  /

Cardholder's name (print)



[www.healthpromotionconference.org](http://www.healthpromotionconference.org)



International Foundation  
P.O. Box 689954,  
Chicago, IL 60695-9954



Questions? Email  
[edreg@ifebp.org](mailto:edreg@ifebp.org), or  
phone (888) 334-3327, option 2.