

Florida School Nutrition Association, Inc.

Region V Seminar
Registration Form



Date, Time, & Location: Saturday – October 16, 2010

9:00 A.M. - 3:00 P.M.

Weeki Wachee High School

12150 Vespa Way

Registration & Continental Breakfast: 8:30 A.M. - 9:00 A.M.

Weeki Wachee, FL 34614

Name _____ **County** _____

Address _____

City _____ **State** _____ **Zip** _____

Email _____ **Daytime Phone** _____

Registration Fee: Pre-Conference: **\$15** (Due by October 7)

On-Site: **\$20**

Checks should be made payable to SNAP. Mail your CHECK AND REGISTRATION FORM to the Food and Nutrition Services Office (Attention: Julie Hedine or Tara Nixon). After October 7, you must register on site.

Registration fee includes: **Continental Breakfast ~ Educational Sessions ~ Lunch ~ Networking**

*Drawings for a Limited Annual Conference Registration and a Legislative Action Caucus Registration
\$50 gift card drawings for new members and those bringing someone for the first time!
\$25 gift card drawing for those dressed in "appropriate" beach attire (board shorts, sun dresses, etc.)*

"Leaders who ROCK!!

4 Secrets to Make a Healthy Impact at School and Beyond"

Dave Timmons, Keynote Speaker

Is this your first Region Seminar? Yes___ No___ If yes, I was invited by _____

Are you a new FSNA member? Yes___ No___

FSNA is committed to ensuring all meeting activities are accessible. To discuss specific needs, including dietary, call (813.794.2435) or email (jhedine@pasco.k12.fl.us) Julie Hedine, FSNA Region V Director before October 4, 2010.

LIABILITY AND INDEMNIFICATION AGREEMENT

I request that you accept me as a participant at the Florida School Nutrition Association (FSNA) Region V Seminar. I understand there is some risk inherent in traveling to and from, and as a result of, attending the seminar. The undersigned hereby releases the FSNA and the committees, members, officers, employees, as well as other participants and other persons who may take part in said seminar from all liability for injury, death and property damage that may be suffered in connection with such activities, where due to negligence or otherwise, accepting such risks involved and waiving all rights of any kind that might otherwise arise. The undersigned agrees to indemnify FSNA, its committees, members, officers, employees, and director against all judgments obtained and against the cost of defense of such claims including reasonable attorney's fees.

SIGNATURE REQUIRED FOR REGISTRATION _____