

Now Registering!

19th Annual Wellness Summit



a program of the Massachusetts Interscholastic Athletic Association

Save The Date!

Oct. 23, 2015

**DoubleTree
Hotel**

Westborough, MA

8:00am-1:30pm

BUILDING THE FUTURE
...through Educational Athletics



For information contact:

Karen Nardone, M.Ed.

Wellness Coordinator

508-541-7997

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Fri. Oct. 23, 2015 · 8:00 am-1:30 pm
Double Tree Hotel·Westborough, MA

The 2015 Wellness Summit features 12 concurrent workshops, more than 30 resource exhibits, and an awards luncheon celebrating those who exemplify healthy life choices.

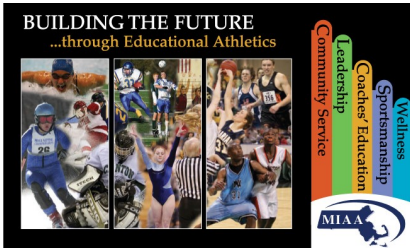
Workshop Topics Include:

Substance Abuse Prevention
Healthy Relationships and Teen Sexuality
Team Building and Leadership
Healthy Life Choices
Teen Mental Health
CPR Anytime Practice
Stress Relief and More!

Who should attend?

Team Captains, Student Ambassadors, Student Leaders, Activity Group Officers, School Administrators, Coaches, Nurses, Wellness Coordinators, Athletic Directors, Guidance Counselors, Wellness Educators, Club Advisors, School Resource Officers, PTO's

5 Professional Hours are available



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19th Annual MIAA Wellness Summit Registration

October 23 2015~ 8:00 am-1:30 pm~Double Tree Hotel~Westborough, MA

Please return this registration form,

to: MIAA, 33 Forge Parkway, Franklin, MA 02038, or fax to: 508-541-9888

The summit registration fee of \$225.00 is designed for a group of five (5) representatives from one school or agency. Groups may register less than five individuals or add additional members to their five-person team at a cost of \$50 per person. The registration fee includes workshops, resource exhibits, continental breakfast, luncheon and materials. Reserve your school's place today, Space fills quickly– don't be left out!

Name of School/Agency _____

Address _____

City, State, Zip _____

Contact Person: _____ Email: _____

Telephone _____ ext _____ Fax _____

Name(s) of persons attending:

- | | |
|-----------|-----------------------|
| 1. _____ | Adult ___ Student ___ |
| 2. _____ | Adult ___ Student ___ |
| 3. _____ | Adult ___ Student ___ |
| 4. _____ | Adult ___ Student ___ |
| 5. _____ | Adult ___ Student ___ |
| 6. _____ | Adult ___ Student ___ |
| 7. _____ | Adult ___ Student ___ |
| 8. _____ | Adult ___ Student ___ |
| 9. _____ | Adult ___ Student ___ |
| 10. _____ | Adult ___ Student ___ |

P.O. _____ Check # _____ Total \$ _____

Cancellation Policy: Cancellations received up to 72 hours before the Summit will be honored. If you do not cancel and do not attend, you are responsible for full payment. Please direct all billing questions to the Accounting Department. Please keep a copy of the registration form for your records.