

# **Positive Living 27 Conference Application**

October 24<sup>th</sup> – 26<sup>th</sup>, 2025 The Island Resort 1500 Miracle Strip Pkwy SE

Fort Walton Beach, FL, 32548

#### **Return Application to:**

OASIS Florida/ Positive Living 26 Fax: (850) 314-0952 P.O. Box 35, Fort Walton Beach, FL 32549 Email to positiveliving@oasisflorida.org

| Full Name: As it Appears on your driver's license  |                         |   |                        | nse |         |  |    |         |             |      |  |
|--|-------------------------|---|------------------------|-----|---------|--|----|---------|-------------|------|--|
| Preferred (Chosen) Name:   |                         |   |                        |     |         |  |    |         |             |      |  |
| Current /  | Address:                |   |                        |     |         |  |    |         |             |      |  |
| City:  |                         | State   |                        |     |         |  |    | Zip Co  | de:         |      |  |
| Phone with area code:  |                         |   |                        |     |         |  |    |         |             |      |  |
| Email:   | Email:                  |   |                        |     |         |  |    |         |             |      |  |
| Gender   | Identity:               | ☐ Male ☐ Female ☐ Transgender Male ☐ Transgender Female ☐ Other If Other, please specify: |                        |     |         |  |    | □ Other |             |      |  |
| Age*:  |                         | ☐ 18 to 25  |                        |     |         | ☐ 26 to 35                                       |    |         | to 45       |      |  |
|  |                         | ☐ 46 to 55  |                        |     |         | □ 56 to 65                                       |    |         |             |      |  |
| Race/E   | thnicity <sup>*</sup> : | ☐ African American/Bla☐ Latinx/Hispanic   |                        |     | n/Black | ☐ Alaskan Native/American Indian☐ White ☐ Other: |    |         | dian 🗆 Asia | an [ |  |
| *  |                         | ☐ Positive  |                        |     |         |  |    |         | ☐ Negative  |      |  |
| HIV S  | tatus <sup>*</sup> :    | If you are HIV+, how many years have you been diagnosed?                                  |                        |     |         |  |    |         |             |      |  |
| * Indicates that providing this information is completely optional   |                         |   |                        |     |         |  |    |         |             |      |  |
| Emergency Contact Information  |                         |   |                        |     |         |  |    |         |             |      |  |
| Name of  | Contact:                |   | Relationship to Guest: |     |         |  |    |         |             |      |  |
| Phone N  | Number:                 |   |                        |     |         | Emai   | l: |         |             |      |  |
| ***Applications will not be processed without at least one emergency contact OR a case manager***  ***Emergency Contact must be available for contact during conference*** |                         |   |                        |     |         |  |    |         |             |      |  |

A Note About Assigned Roommates: Positive Living is an inclusive and welcoming event. We will not and do not honor requests to segregate roommates on the basis of race, sexual orientation, gender identity or religious belief. This principle extends in to all aspects of our conference, and all attendees are expected to conduct themselves in the same manner. Everyone will have a roommate unless you register for a private room. If you know of someone you would like to room with, be sure to provide their name below in the provided section. If we receive a matching application we will do our best to room you together. If you do not make a request, or if we do not receive a matching request, OASIS Florida will assign your roommate.

Standard Rates include lodging for 2 Nights (Friday, October 24th and Saturday, October 25th), Conference Materials, Friday Dinner, Saturday Breakfast, Saturday Lunch, Saturday Dinner and Sunday Breakfast.

## Meals are not included for additional nights.

If you need to arrive early or depart later than the conference dates you may do so by selecting and providing payment for any additional night(s).

| Please Fill Out This Section ONLY If Are Requesting/Prefer to Have A SHARED ROOM.   |                |                  |                           |                           |          |  |  |  |
|---|----------------|------------------|---------------------------|---------------------------|----------|--|--|--|
| SHARED ROOM (Select one)  ADDITIONAL NIGHTS (Select all that apply)   |                |                  |                           |                           |          |  |  |  |
| ☐ Standard Shared Room \$250  | □Wednesda      | y Stay \$150     | ☐Thursday Stay \$150      | ☐ Monday Departure :      | \$150    |  |  |  |
| ☐ Gulf View Shared Room \$300   | □Wednesda      | y Stay \$150     | ☐Thursday Stay \$150      | ☐ Monday Departure :      | \$150    |  |  |  |
| Will You Need Additional Nights? If so, please provide your specific arrival/departure date(s) below:   |                |                  |                           |                           |          |  |  |  |
| Arrival: Departure:   |                |                  |                           |                           |          |  |  |  |
| I would like to room with:  | · ·            |                  |                           |                           |          |  |  |  |
| Anyone who is not a paying attendee may not share your room whether they are partners, family, friends, etc.  Those who wish to share your room must complete an application and pay the associated cost(s).  If you are choosing a specific roommate, your name must be on their application or you will receive a random assigned roommate. |                |                  |                           |                           |          |  |  |  |
| You and your requested roommate must arrive and depart on the same day. If one of you arrives earlier or stays later, you will be responsible for paying the private room rate for any night your roommate is not present.  |                |                  |                           |                           |          |  |  |  |
| Please Fill Out   | This Section C | NLY If Are Reque | esting/Prefer to Have A I | PRIVATE ROOM              |          |  |  |  |
| PRIVATE ROOM (Select one)   |                | ADD              | OITIONAL NIGHTS (Select   | all that apply)           |          |  |  |  |
| ☐ Standard Private Room \$475   | □Wedn          | esday Stay \$275 | ☐Thursday Stay \$2        | 75                        | e \$275  |  |  |  |
| ☐ Gulf View Private \$500   | □Wedn          | esday Stay \$275 | ☐Thursday Stay \$2        | 75                        | e \$275  |  |  |  |
| Will You Need Additional Nights? If so, please provide your specific arrival/departure date(s) below:   |                |                  |                           |                           |          |  |  |  |
|   |                |                  |                           |                           |          |  |  |  |
|   |                |                  |                           |                           |          |  |  |  |
| If you <u>DO NOT</u> need lodgin  | ng, and are pa | aying for the Co | nference Materials an     | d Meals ONLY, select here | <b>.</b> |  |  |  |
| ☐ Conference Materials/Meals Only \$175   |                |                  |                           |                           |          |  |  |  |
| Persons who arrive before their indicated date, without notice, will have to pay the full amount for a room at the conference rate on site.   |                |                  |                           |                           |          |  |  |  |
| OTHER NEEDS: Please select all that apply. While every attempt will be made to accommodate these needs, they CANNOT be guaranteed. Unfortunately, OASIS is not able to meet the unique dietary needs of every guest. We will have limited options for special dietary needs. Please be prepared to bring your own food if necessary.          |                |                  |                           |                           |          |  |  |  |
| Are you a participant that would lik  | e to request a |                  |                           |                           |          |  |  |  |
| ☐ Limited Mobility  |                | ∐Handicap Roo    | m-roll in shower          | ☐Visually Impaired        |          |  |  |  |
| Deaf  |                |                  |                           |                           |          |  |  |  |
| Other:  |                |                  |                           |                           |          |  |  |  |
|   |                |                  |                           |                           |          |  |  |  |
| Will you have a service animal with you during the conference?  |                |                  |                           |                           |          |  |  |  |
| □ Yes   | S              |                  |                           | □ No                      |          |  |  |  |

<sup>\*</sup>You must specify if you are bringing a service animal prior to arriving at the conference.\*

| Positive Living T-Shirts  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
|   | OASIS will be offering the option to purchase t-shirts from the conference for \$25. |  |  |  |  |  |  |
|   | They will be available to be picked up upon check-in at The Island.                  |  |  |  |  |  |  |
| T-shirts that are not claimed upon arrival will be for sale, first come first serve, starting Saturday, October 25th. |  |  |  |  |  |  |  |
| OASIS Florida will NOT refund unclaimed t-shirt costs.  |  |  |  |  |  |  |  |
| □ XS         □ S         □ M         □ L         □ XL         □ XXL         □ XXXL         □ XXXXL                    |  |  |  |  |  |  |  |
| How many do you want? []  |  |  |  |  |  |  |  |

#### **Payment Information:**

| Please complete this section as completely and accurately as possible.   |  |  |  |  |  |
|--|--|--|--|--|--|
| Applications WILL NOT Be Processed Without Full Payment.   |  |  |  |  |  |
| ☐ Check Payable to OASIS Florida. <b>Check #:</b>  |  |  |  |  |  |
| ☐ Money Order Payable to OASIS Florida. <b>Money Order #:</b>  |  |  |  |  |  |
| ☐ Payment Plan (Which Plan You Want to Use):   |  |  |  |  |  |
| ☐ Sponsorship  |  |  |  |  |  |
| ☐ Credit/Debit Card:   |  |  |  |  |  |
| Expiration Date: Security Code: Billing Zip Code:  |  |  |  |  |  |
| The Security Code is the 3 Digit number on the back of your card. For Amex it is the 4 Digit code printed on the front |  |  |  |  |  |
| of your card just above and to the right of your main credit card number.  |  |  |  |  |  |

# **Payment Plan Options:**

- 1. Equal Installment Plan
  - a. \$50 is due as a **non-refundable** security deposit to secure your lodging for the conference.
  - b. Remaining balance is divided equally into monthly installments beginning the month after application completion.
  - c. Monthly payments are due on the first Friday of each month.
- 2. Pay as you Can Plan
  - a. \$50 is due as a **non-refundable** security deposit to secure your lodging for the conference.
  - b. Guest pays as they're able up to, and until balance is due in full.
  - c. Payments can only be made in the form of check, money order, credit or debit card.
  - d. Balance is due on October 3<sup>rd</sup> unless other agreements have been made.

### **Sponsorship:**

| If your registration is being sponsored by an agency or individual other than yourself, please provide us with the name |                         |  |  |  |  |
|---|-------------------------|--|--|--|--|
| of that agency or person. Doing so gives us the means to contacting them, if necessary.                                 |                         |  |  |  |  |
| Sponsor Name:   | Phone (with area code): |  |  |  |  |
| Email Address:  |                         |  |  |  |  |

Confirmation will be sent upon receipt of full payment or security deposit. Applying without payment WILL NOT hold a spot and application will be discarded. No refunds will be given after October 3<sup>rd</sup>, 2025.

**Return check fee:** If a registration check is returned to us, a return fee of \$35 will be charged to complete registration. A confirmation e-mail will be sent once you are accepted. Cancellation requested by October 3<sup>rd</sup>, 2025 deadlines will incur a 10% charge if payment was made by credit card.

After this deadline no money will be returned without medical documentation.

# **Positive Living 27 Conference Code of Conduct**

All participants must read, sign and return this page when submitting your application. Failure to comply may prohibit you from attending future conferences.

- We often receive more applications than we can accommodate. If you are granted a spot to attend Positive Living, you are expected to attend all workshops that are presented.
- Any roommate issues or concerns that arise are to be brought to the attention of OASIS staff NOT hotel staff.
- If you arrive before your submitted arrival date without notice, or wish to stay beyond your submitted departure date without notice, it will be your responsibility to pay the resort directly at the normal hotel room cost.
- You will be responsible for any damage done to hotel property or equipment.
- All attendees must wear conference name badge at all times. No one will be admitted to workshops or meals without wearing their name badge, and should comply with all sign in procedures.
- Smoking/vaping in hotel room, unwanted sexual advances or any disruptive or offensive conduct directed toward fellow conference attendees, conference staff or volunteers, hotel guests or staff will result in expulsion from the conference without refund.
- If you cannot attend Positive Living, please notify OASIS Florida as soon as possible. NO refunds will be made after Friday, October 3rd, at 6:00pm CST without a physician's note. Any approved refunds will incur a return fee of 10% if registration was paid by credit card.
- If OASIS Florida deems it necessary to call medical or police assistance, any costs involved will be the responsibility of the parties involved and not OASIS Florida or Island Resort.
- OASIS Florida Positive Living and Island Resort are not responsible for attendees being captured in photos/videos taken by fellow attendees.
- Any animal in the company of a registered conference guest must be a certified service or emotional support animal.
- OASIS is not responsible for a guest's violations of hotel-specific policies and any penalties incurred as a result of the violation(s).
- Comments/Actions based on race, sexual orientation, gender, religious or political beliefs will not be tolerated.

All persons shall be treated with respect. Positive Living is a conference dedicated to fostering a safe environment for all of its attendees. There is a zero tolerance for misconduct and violating these expectations will AT MINIMUM result in your expulsion from this year's conference. The degree to which the code of conduct is violated will also result in more strict consequences to match the severity of any offense.

| Signature: | Date: |
|------------|-------|

By signing my name above, I certify that I have read, understand and will abide by the Positive Living Conference Code of Conduct.