

Registration Form

(PLEASE PRINT LEGIBLY. DUPLICATE FORMS AS NEEDED.) This form will be used as the basis for registration information. Use a separate form for each registrant.

Nickname for Badge _____

Name _____ Degree _____ Sex Male Female

Preferred Address Home Office _____ City _____ State _____ Zip _____

Telephone: Office () _____ Home () _____ Fax () _____ E-mail: _____

STATUS: AGPA Member AGPA Applicant Nonmember (membership application on page 15) Board Member Annual Meeting Faculty Annual Meeting Committee Member
PROFESSION: Psychiatrist Psychologist Social Worker Nurse Alcohol & Drug Abuse Counselor
 Creative Arts Therapist Marriage & Family Therapist Mental Health Counselor Pastoral Counselor Other _____

Is this your 1st Meeting? Yes No How did you hear about us? _____ Years of group psychotherapy practice? _____

VISIT THE AGPA WEBSITE (www.agpa.org) UNDER MEETINGS AND EVENTS FOR FULL DESCRIPTIONS; SCHOLARSHIP INFORMATION IS ALSO AVAILABLE.

CONTINUOUS ONLINE GROUP: February 24-March 9: Members \$90; Nonmembers \$180 (AGPA 2011 Annual Meeting registrants can participate gratis.)

SPECIAL INSTITUTE REGISTRATION: SI-1 Dr. Richard Billow, "Loving, Hating, and Knowing...."

SI-2 Dr. Judith Coché, "The Power of Couples...."

TWO-DAY INSTITUTE REGISTRATION: List preferences for (Tuesday & Wednesday, March 1 & 2) refer to Process Group Experience Sections or Specific Interest Sections

1st Choice	2nd Choice	3rd Choice	4th Choice
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CONFERENCE REGISTRATION: List preferences (Indicate courses, open sessions as well as workshops by event numbers.)

	THURSDAY			FRIDAY			SATURDAY		
	1st Choice	2nd Choice	3rd Choice	1st Choice	2nd Choice	3rd Choice	1st Choice	2nd Choice	3rd Choice
Early Bird									
All-Day									
Morning									
Afternoon				2:30 - 4:00					
				4:30 - 6:00					

SPOUSE/GUEST REGISTRATION: \$275.00 (Includes Spouse/Guest Breakfast, GPF Public Event, Plenary Addresses, and GPF Dance and Luncheon.)

Name _____

		Special Institute	2-Day Institute	3-Day Conference	1-Day Conference	5-Day Package
By December 31	Member	\$250	\$350	\$480*	\$205	\$755*
	Nonmember	\$310	\$480	\$670*	\$260	\$1010*
January 1 & Onsite	Member	\$280	\$400	\$530*	\$225	\$825*
	Nonmember	\$340	\$530	\$720*	\$280	\$1100*

* Includes GPF Friday Dance and Saturday Luncheon

SPECIAL OFFER: Register for the Special Institute plus the Five-Day Package and deduct \$50 from your total fees.

If you would like to join (complete application on reverse) or renew your membership, please include \$140 thru 6/2011 or \$210 thru 6/2012.

Group Psychotherapy Foundation Student Scholarship Contribution.

Check enclosed Visa MasterCard American Express

Discount applied: New Professional/Student/Resident/Retiree Institution/Agency Active Duty Military Clinician

Name as it appears on card _____

Acct # _____ Exp. Date _____

Signature _____

REGISTRATION TOTAL: \$ _____

MEMBERSHIP TOTAL: \$ _____

GPF TOTAL: \$ _____

GRAND TOTAL: \$ _____

How to Complete the Registration Form

SPECIAL INSTITUTE REGISTRATION:

Dr. Richard Billow

Dr. Judith Coché

TWO-DAY INSTITUTE REGISTRATION:

1st Choice	2nd Choice	3rd Choice
IA-12	VII	XIX

CONFERENCE REGISTRATION:

THURSDAY			
	1st Choice	2nd Choice	3rd Choice
Early Bird	201	204	205
All-Day	C-1		4-a
Morning		8	
Afternoon		306	

REMEMBER:

- To write all information legibly as it will be used to prepare all registration materials.
- Always include alternate event selections on the registration form; if you don't select alternates you may not be assigned to an event.
- The Courses cover various time slots during the three days of the Conference. Please keep this in mind when making other event selections.
- The Special Institute is not included in the Five-day Package fee; if you register for all six days there is a special discount of \$50 off the total registration fees.

AMERICAN GROUP PSYCHOTHERAPY ASSOCIATION, INC.

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Toll-Free: (877) 668-AGPA (2492) or (212) 477-2677

Fax: (212) 979-6627 • E-mail: registration@agpa.org • Web site: www.agpa.org

Register Now! Prices go up January 1st