

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.

Name _____ Degree _____

Nickname for Badge _____ Sex Male Female

Office Address _____ City _____ State _____ Zip _____

Home Address _____ 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.

SPECIAL INSTITUTE REGISTRATION: Dr. Gordon Lawrence, "The Social Dreaming Matrix as a Crucible for Transforming Thinking"
 Drs. David & Jill Scharff, "Working in Depth with Families and Couples : An Experiential Approach to New and Old Paradigms"

TWO-DAY INSTITUTE REGISTRATION: List preferences for (Tuesday & Wednesday, March 8 & 9) refer to Process Group Experience Sections (IA1-12, IB1-2, IC1-2, ID1-2, IE) or Specific Interest Sections (II-XXII)

1st Choice	2nd Choice	3rd Choice	4th Choice
------------	------------	------------	------------

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									

SPOUSE/GUEST REGISTRATION: \$225.00 (Includes GPF Dance and Luncheon, Spouse/Guest Breakfast, Public Event and two Plenary Events.)

		Special Institute	2-Day Institute	3-Day Conference	1-Day Conference	5-Day Package
By December 31	Member	\$210	\$305	\$415*	\$175	\$655*
	Nonmember	\$265	\$415	\$580*	\$230	\$875*
January 1 & Onsite	Member	\$235	\$345	\$455*	\$185	\$730*
	Nonmember	\$290	\$455	\$620*	\$240	\$950*

* 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 \$125.

Group Psychotherapy Foundation Student Scholarship Contribution.

Check enclosed Visa MasterCard American Express

Discount applied: New Professional/Student/Resident/Retiree Institution

Acct # _____ Exp. Date _____

Signature _____

For Office Use: No. _____ Rec'd _____ Proc'd _____ Pd _____ Rfd _____
 Reg _____ Lunch Ticket # _____ Party Ticket # _____

AMERICAN GROUP PSYCHOTHERAPY ASSOCIATION, INC.

c/o Chase Manhattan Bank, Church Street Station, P.O. Box 6359, New York, NY 10249-6359

Toll-Free: (888) 808-AGPA or (240) 243-2236

Fax: (301) 869-8608 • E-mail: memberservices@agpa.org • Web site: www.agpa.org

How to Complete the Registration Form

SPECIAL INSTITUTE REGISTRATION:

- Special Institute with Dr. W. Gordon Lawrence
 Special Institute with Drs. David & Jill Scharff

TWO-DAY INSTITUTE REGISTRATION:

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

CONFERENCE REGISTRATION:

THURSDAY			
	1st Choice	2nd Choice	3rd Choice
Early Bird	204	202	203
All-Day	2-a		C-1
Morning		7	
Afternoon		305	

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 multiple 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.

Non-Profit
 U.S. Postage
 PAID
 New York, NY
 Permit No. 5169

Register Now!
Prices go up January 1st