



# ASGPP 2005 ANNUAL MEETING REGISTRATION FORM

NAME (INCLUDE DEGREES) \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE/PROVINCE \_\_\_\_\_  
 ZIP/POSTAL ZONE \_\_\_\_\_ COUNTRY \_\_\_\_\_  
 FIRST NAME/NICKNAME FOR BADGE \_\_\_\_\_  
 PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
 E-MAIL \_\_\_\_\_

**PRESENTERS: Check here if you are a presenter**

## NEW MEMBER INCENTIVE

Become a member today and receive a special conference promotion discount of 50% on your dues and enjoy member rates to attend the conference. New member rates are \$50 (regular) and \$25 (student).

In case of emergency notify: \_\_\_\_\_

Please indicate if you have special needs FOR OFFICE USE ONLY

FOR OFFICE USE ONLY

## REGISTRATION FEES

All fees are given in \$US

	Before March 14, 2005				After March 14, 2005		
	Mem Student/ Retiree	Student/ Retiree	Member	Non-Mem	Member	Non-Mem	
<input type="checkbox"/> Full Conference* (Friday, Saturday, Sunday)	\$250	\$265	\$400	\$450	\$450	\$500	\$ _____
<input type="checkbox"/> Full Day Pre-Conference Institute-Thursdays (Or 2 Half-Day Pre-Conference Institutes)	\$120	\$125	\$135	\$155	\$145	\$165	\$ _____
<input type="checkbox"/> Full Day Post Conference Institute-Monday	\$120	\$125	\$135	\$155	\$145	\$165	\$ _____
<input type="checkbox"/> 1/2 Day Pre-Conference (Thursday)	\$ 65	\$ 70	\$ 80	\$ 90	\$ 90	\$100	\$ _____
<input type="checkbox"/> 1 Day Conference Package (Fri., Sat. or Sun.)	\$110	\$115	\$150	\$185	\$165	\$200	\$ _____
<input type="checkbox"/> 1/2 Day Conference Pkg. (Fri., Sat. or Sun.)	\$ 65	\$ 70	\$ 80	\$ 90	\$ 90	\$100	\$ _____

\*Full Conference fees include a voucher to attend the Awards Presentation & Reception early Saturday evening. All other attendees wishing to attend the event or anyone wishing to obtain additional tickets should go to the Registration desk before Friday Noon. Fee: \$35 per person.

### Additional Events

Moon Over Miami Dance & Party ..... x \$ 20..... \$ \_\_\_\_\_

Here's an additional tax-deductible contribution to help underwrite this year's conference..... \$ \_\_\_\_\_

2005 Membership Dues  \$50 (student)  \$100 (regular) – New members: 50% discount  
All members add (\$10) if you are from a country other than the US, Mexico or Canada \$ \_\_\_\_\_

TOTAL AMOUNT DUE (\$US)..... \$ \_\_\_\_\_

Check here if you are interested in Room Sharing (This service ends on March 1, 2005. See page 26 for complete details).  
Please review ASGPP Refund Policy on page 26.

Please return completed Registration & Workshop Form and check or money order payable in US funds to:

**ASGPP, 301 N. Harrison Street, Suite 508, Princeton, NJ 08540**

**IMPORTANT:** Please read information on Credit Card Charges on preceding page. Only Visa & MasterCard accepted.  
You may now charge your registration online at [www.asgpp.org](http://www.asgpp.org).

Name as it appears on the credit card \_\_\_\_\_ Credit Card #: \_\_\_\_\_

Expir. Date \_\_\_\_\_ Last 3 digits on signature line: \_\_\_\_\_ The 3-digit CVV code is located on the reverse side of your card and essential to process your charge.

Billing address for card if different from above \_\_\_\_\_

Signature authorizing charge of "Total Amount Due" above plus processing fee: \_\_\_\_\_

**DO NOT E-MAIL** credit card information. Mail this form to the ASGPP or send it along with the Workshop Registration page on reverse via secure fax to: 609-936-1659.

**GROUP RATES:** ASGPP is offering a special group rate for the Full Conference to college/university students and agency employees. Six (6) or more students must register together at the Group Rate of \$220/per person. Students must be matriculating in an accredited college/university and carrying a minimum load of 6 credits and/or pursuing a full-time residency or internship. All student registrations must be sent in the same envelope and include photocopies of college/university identification. We are also offering a group rate for three (3) or more attendees from a mental health or medical agency or hospital at the rate of \$415 per person. Registrations must be sent together with a letter from the agency/hospital administration, listing the attendee/employees.

ASGPP is offering a group rate to psychodrama training institutes and groups of 4 or more attendees at a rate of \$300. All registrants must be members of the ASGPP. Registrations must be sent together in the same envelope with a cover letter from the trainer listing the names of the trainees. Group rates apply only to Full Conference fees (Friday, Saturday & Sunday) and include a voucher to attend the Awards Presentation Reception on Saturday. This same offer (\$300) would also apply to 4 or more teachers from any accredited school district.

**IMPORTANT:** Please sign up for workshops on the reverse side of this page.  
We cannot process your registration if you have not signed up for the workshops you wish to attend.



# WORKSHOP REGISTRATION

Last Name \_\_\_\_\_

Please list your top **three choices** in order of preference for each workshop time frame. Space is extremely limited this year. **If you do not list three choices, you may not get a workshop in that time slot.** The numbers in parentheses indicate the workshops that are available during each time slot. **Choose carefully.**

	1st CHOICE	2nd CHOICE	3rd CHOICE
<b>Thursday, April 14, 2005</b>			
9:30 am - 5:30 pm	*Full Day Pre-Con Training Institute..... (#1-7)		
9:30 am - 12:30 pm	*Morning Pre-Con Training Institute..... (#8-9A)		
2:30 pm - 5:30 pm	*Afternoon Pre-Con Training Institute..... (#10-12)		
<b>Friday, April 15, 2005</b>			
10:15 am - 12:45 pm	Morning Workshops..... (#13-23)		
4:00 pm - 6:30 pm	Afternoon Workshops..... (#24-36)		
<b>Saturday, April 16, 2005</b>			
10:30 am - 1:00 pm	Morning Workshop..... (#37-48)		
1:15 pm - 2:15 pm	Lunch / Special Interest Grps / Conversation Hrs / Mini Sessions..... (#49-53)		
2:30 pm - 5:00 pm	Afternoon Workshops..... (#54-66)		
<b>Sunday, April 17, 2005</b>			
9:15 am - 11:45 pm	Morning Workshops..... (#67-78)		
12:45 pm - 2:15 pm	Mid-Day Workshops..... (#79-89)		
2:30 pm - 5:00 pm	Afternoon Workshops..... (#90-101)		
<b>Monday, April 18, 2005</b>			
9:30 am - 5:30 pm	*Full Day Post Con Workshops..... (#102-106)		

\*Additional Registration Fee Required

## SESSION ASSISTANTS

Session Assistants are an important element of the ASGPP conference program. Please indicate below if you are interested in participating as a Session Assistant at this year's conference. Linda Condon, the Session Assistant Coordinator will contact you prior to the meeting, to confirm your appointment and assign you to specific workshops. Due to the limited number of sessions we cannot guarantee that all those who express an interest in being a Session Assistant will be assigned to a session. Session Assistants will receive silent auction dollars upon completion of all sessions assigned.

Yes, I am interested in being a session assistant for (please circle one) 1 2 3 sessions

## VOLUNTEERS

In order to make our conference a success, we will need volunteers for many activities. We hope that you will offer your services both onsite and prior to the conference. The Volunteer Coordinator will contact you. The Volunteer Coordinator is Dr. Nancy Kirsner, 305-274-8283; email Drncyk@aol.com

NAME \_\_\_\_\_ PHONE (day) \_\_\_\_\_ (evening) \_\_\_\_\_

E-MAIL \_\_\_\_\_