41st Annual Wellness and Recovery Summit | June 15-18, 2018 | Denver, Colorado Presented by the Academy of Psychiatric Rehabilitation and Recovery and PRA, in partnership with Colorado-PRA

ATTENDEE REGISTRATION FORM

First Name: Last Name:						
Badge First Name (if different; ex. Bob for Robert):						
Email:	Daytime Phone:					
Title: Credentials:						
Organization/Agency:						
Billing Address (Street):						
City: State/Province: Postal Code: Country:						
How did you hear about this year's Summit? Email Social Media Website Colleague Other:						
Will you attend the First Time Attendee / New Member Orientation, Saturday 10:30am-11:30am?						
SPECIAL ACCOMODATIONS & REQUESTS ADA Accomodations: Wheelchair Access Service Animal ASL Interpreter Other:						
Dietary Restrictions: U Vegetarian U Vegan Kosher Gluten-Free Food Allergies:						
Emergency Contact Name: Emergency Contact Phone:						
SUMMIT REGISTRATION						
Please circle applicable registration fee.						
Onsite registration will be available at the Late Rate listed below. Early Bird (Deadline 4/19) Regular (Deadline 5/31) Late (Onsite)					1	
	Early Bird (Deadline 4/19) Regular (Deadline 5/31) PRA Member/Nonmember PRA Member/Nonmember			PRA Member/Nonmember		
			bei			
Individual: Full Summit	\$460 / \$580	\$510 / \$630	\$560 / \$680		1	
VA Employee: Full Summit	\$460 / \$580	\$460 / \$580		\$510 / \$630		
Faculty: Full Summit	\$325 / \$445	\$325 / \$445		\$375 / \$495		
One-Day Registration: Saturday	\$295 / \$415	\$345 / \$465		\$395 / \$515		
One-Day Registration: Sunday	\$295 / \$415	\$345 / \$465	\$395 / \$515			
One-Day Registration: Monday	\$295 / \$415	\$345 / \$465	\$395 / \$515			
SUMMIT ADD-ONS: One Per Attendee (optional)*						
*NOTE: You must be registered for the FULL Summit to participate in these activities. Additional fee required.						
Certified Psychiatric Rehabilitation	Practitioner (CPRP) Exam Preparatio	n Course (Friday and Saturda	ay, 8:00ar	n – 5:30pm)	\$95	
Pre-Conference Institute: Transitic	on-Aged Youth and Young Adults (All-	Day Friday)			\$150	
Pre-Conference Institute: Innovative Practices in Recovery based Community Mental Health (All-Day Friday)					\$150	
PAYMENT INFORMATION *PLEASE NOTE: REGISTRATION WILL NOT BE PROCESSED UNTIL PAYMENT IS RECEIVED*						
Payment Method: Check Payable to PRF (#) Credit Card: Visa MasterCard AMEX Discover						
			xpiration Date (MM/YY):			
Registration Fee: \$		-				
	Name (as it appears on the card): Billing Po			stal Code:		
Summit Add-On: \$	interne (us le appears on the cara).					
PRA Membership	Signature:			Date:		
New/Renew (\$125): \$	Signature.			Dute.		
Total Due: \$	Payments must be made in USD Funds. Fed Tax ID #23-2008207 *Refund requests received by May 1, 2018 will be honored and will incur a \$75 processing fee. Refunds between May 2 and May 14, 2018 will incur a \$125 processing fee. No refunds will be issued for requests made after May 14, 2018. Refund payments may take up to six weeks from the date of your refund request. *Substitutions: Written notification of a substitution must be received by 5:00pm ET on May 31, 2018 and will not incur any additional fee. No substitutions will be honored on site.					
	Questions? Email info@psychrehabassociation.org					

Registration will not be processed until payment is received.

Return to PRF: info@psychrehabassociation.org, fax 703.506.3266, or mail 7918 Jones Branch Dr. Suite 300, McLean, VA 22102