



2017 Regional Integrated Mental Health Conference

***Accredited for 16.25 AMA PRA Category 1 Credit™ *16.25 CE Credits**

April 21-23, 2017, West Baden Springs Hotel, West Baden Springs, IN

REGISTER TODAY @ WWW.PDALLC.COM

REGISTRATION FORM

Three easy ways to register:

*Online: Visit www.pdallc.com – credit card payment only

*Fax: Complete form with credit card information and fax to 888.477.9119

*Mail: Complete form, make check payable to IPS and mail to:
Indiana Psychiatric Society
P.O. Box 30413
Indianapolis, IN 46230

Confirmation of registration will be emailed within 24 hours of receipt. If you do not receive confirmation within 10 days of submission, contact Sara at lizgrouppllc@yahoo.com or 888.477.9119.

***Fill out form completely. Information will be kept confidential. PLEASE PRINT.**

Full name and degree (MD, DO, RN, etc.) _____

Affiliation/category (ie: IPS, APA, other) _____

Email address _____

Daytime phone number _____

- Registration fee includes CME/CE credits, online access to syllabus, PRMS Welcome Reception Friday evening (registrant only), continental breakfast Friday & Saturday & Sunday mornings, and Friday & Saturday luncheons.
- To receive the early bird rate, registration and payment must be received no later than February 15, 2017.
- To receive the regular rate, registration and payment must be received no later than March 16, 2017.
- Registrations received after March 16, 2017 will be subject to full price.
- Onsite registrations will incur a \$25 charge above the highest rate **if space is available**.
- CANCELLATIONS: A 50% refund will be made on registration only if cancellation notification is made in writing and received by event staff by 03/17/17. No refunds or credits after 03/17/17.

Registration *Circle one category (fee)	Available until 2/15/17	2/16/17- 3/16/17	3/17/17- 4/7/17
Members of IPS and other APA district branches	\$245.00	\$270.00	\$295.00
IPS and other APA Early Career Psychiatrists	\$185.00	\$210.00	\$235.00
IPS and other APA Residents & medical students	\$125.00	\$125.00	\$125.00
Non-member physicians	\$325.00	\$350.00	\$375.00
Non-physician (ie: PhD, LCSW, RN, etc.)	\$270.00	\$295.00	\$320.00
Students	\$150.00	\$175.00	\$200.00

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Circle one option in each of the boxes to the right indicating registrant intentions. All meals listed below are included in your registration fee.		
Friday continental breakfast	Yes	No
Friday luncheon	Yes	No
Friday evening PRMS Welcome Reception	Yes	No
Saturday continental breakfast	Yes	No
Saturday luncheon	Yes	No
Sunday continental breakfast	Yes	No

Additional Purchase Options *Purchases non-refundable.	By 4/1/17
Printed syllabus – will not be available for purchase on site	\$20.00
Syllabus on flash drive – will not be available for purchase on site	\$10.00
Adult Guest – Friday Evening PRMS Welcome Reception	\$30.00
Adult Guest Package – Friday breakfast & reception, Saturday breakfast & lunch, Sunday breakfast	\$199.00
Registrant – Saturday Family Dinner (ECPs, RFMs, and IPS Council members only)	\$20.00
Adult Guest - Saturday Family Dinner (ECPs, RFMs, and IPS Council member guests only)	\$20.00
Child Guest - Saturday Family Dinner (ECPs, RFMs, and IPS Council member guests only)	\$10.00 each
Resident scholarship contribution	

Payment method:

Circle one: Check Credit Card Amount included/to be charged: _____

Name on credit card _____

Billing address (include street number, street, city, state, zip) _____

Phone number tied to credit card _____

Credit card number _____

Credit card expiration date _____

Credit card security code (3 or 4 digit code on card) _____