

Registration Info

AACAP Annual Meeting with special participation of
Asociación Mexicana de Psiquiatría Infantil, A.C.
October 24–29, 2006, San Diego Marriott Hotel and Marina, San Diego, CA

Deadline for Return: September 15, 2006

Instructions and Procedures

PLEASE READ CAREFULLY

Registration – 3 Easy Ways to Register!

- **ONLINE:** INSTANT online registration/confirmation (same day processing) at www.aacap.org. Registering on the web locks in your ticketed event immediately! In addition, you receive immediate confirmation of your registration. **CREDIT CARDS:** VISA, MasterCard, or American Express are accepted. Copy your account number and expiration date EXACTLY as it appears on your card, and indicate the amount to be charged. Sign the authorization.

- **FAX:** FAST the next best (allow 1 week for processing). Credit cards only. If your last name begins with:

A-H, fax to 202.464.0131

I-Q, fax to 202.464.9980

R-Z, fax to 202.966.2891

Available 24 hours a day. Please do not subsequently mail the same form or fax more than once.

- **MAIL:** SLOW (allow 3 weeks for processing). Mail form and payment to: AACAP, 3615 Wisconsin Avenue, NW, Washington, DC 20016-3007. If you mail, DO NOT fax. Money order or checks in U.S. funds are accepted. Please make checks payable to: American Academy of Child and Adolescent Psychiatry or AACAP.

Telephone registrations cannot be accepted.

Cash transactions for on-site registration are NOT allowed. Credit Cards ONLY for on-site registration.

Advance Registration/Confirmation:

Confirmation: AACAP confirms advance registrations by fax, mail, or email if received by September 15. If you do not receive registration confirmation within four weeks of sending your form, please call 202.966.7300, ext. 136 or email registrar@aacap.org. All payments must accompany registrations. We do not reserve space if improper fees are received.

Cancellation/Refund Policy: After September 15, **absolutely no registration refunds are granted.** Requests made in writing and postmarked by September 15 receive a 75% refund. Telephone cancellations cannot be accepted. AACAP mails refunds one month after the Annual Meeting and is not financially responsible for attendees' travel expense in the unlikely event the Annual Meeting is canceled.

Registration Fee Includes: Scientific Program (approximately 50 CME credits in Category I of the Physician's Recognition Award of the American Medical Association), CME certificate, Book of Scientific Proceedings, Exhibits Guide, Opening Reception, and access to exhibits.

Procedures: Advance registrants may pick up their badges and registration materials at the ADVANCE registration counter. If your registration form is not received by September 29, it will not be processed. Plan to register at ON-SITE registration. Registration opens at 4:00 p.m. Monday, October 23.

Registration Types:

Spouse Registration: Only one spouse/guest is allowed to register with each full-time registrant and cannot be an AACAP member. **THE SPOUSE/GUEST MUST RESIDE IN THE SAME HOUSEHOLD AS THE REGISTRANT.** This category is intended for a spouse/significant other. CME credit is not provided and spouse registrants may not attend ticketed events.

Medical Students, Child Fellows, and Other Residents: A photocopy of your ID or a letter from your program director must be attached to your registration form to qualify for a reduced registration fee if you are a non-member. (Student and resident members have already submitted proof of status.) We cannot process your registration if a photocopy of ID (or letter) is missing. Residents and medical students can register for ticketed events at half price the member or non-member fee. Enter the half price in the total column.

Monitors: Students and other non-professionals qualify to earn free registration by volunteering as monitors for one full day. To apply for a position as a monitor, contact monitor@aacap.org.

Presenters: All presenters must register to be admitted to the Annual Meeting. All members of AACAP must pay member registration rates, regardless of presenter status. Non-member presenters who are psychiatrists must pay non-member registration rates. Non-member presenters who are not psychiatrists may register for the reduced rates of \$90 by September 15 or \$105 after.

International Attendees: Please register on the web or by fax if you are an international attendee. Your confirmation arrives much more quickly.

Exhibitors: Exhibitors may contact AACAP's Exhibits/Meetings Manager at 202.966.7300, ext. 104 or exhibits@aacap.org.



Registration Info

Membership:

Non-Members Joining AACAP: Joining AACAP now before the meeting saves you \$205.

The \$615 fee includes Annual Meeting registration, membership application fee, and over one year AACAP membership (now through December 2007). Apply now to insure that we process your application before the Annual Meeting. If for any reason AACAP does not approve your membership application, we refund \$190 to you. If you should decide to cancel your Annual Meeting registration, standard refund procedures apply.

AACAP membership is open to physicians with additional training beyond medical school in general psychiatry, and in an approved child and adolescent psychiatry training program. Affiliate membership is offered to physicians in related fields, i.e., pediatrics, general psychiatry. (Medical students and residents in psychiatry, child and adolescent psychiatry, or pediatric psychiatry pay a reduced fee for membership.) Membership is also extended to child and adolescent psychiatrists living outside of the U.S. and Canada as Corresponding members. Contact Jamie Cole, Membership Coordinator, at tel: 202.966.7300 x134, fax: 202.464.0131, membership@aacap.org. You can also download a membership application on our web site at www.aacap.org.

Ticketed events sell out quickly.

Beat the rush and register online at www.aacap.org!



CME Credits

The American Academy of Child and Adolescent Psychiatry is accredited by the Accreditation Council for Continuing Medical Education to sponsor continuing medical education for physicians.

The American Academy of Child and Adolescent Psychiatry designates this educational activity for a maximum of 50 hours in category 1 credit towards the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

CME credit hours are approximately 50 hours for the program: 1.5 hours for each Clinical Consultation Breakfast, 3 hours for each Clinical Perspective, 7 hours for each Clinical Practicum, 6 hours for each Institute, 2.5 hours for each New Research Poster Session, 1.5 hours for each Special Interest Study Group, 3 hours for each Symposium, and 3 hours for each Workshop.

How do you earn CME credit?

CME credit is earned by attending the educational sessions. Each hour you attend an educational session, you earn an hour of category I continuing medical education credit. It is your responsibility to keep track of the sessions you attend. You should note the sessions you attend in your *Program Book* and keep it for your records. AACAP does not keep records of registrants' attendance at individual Annual Meeting sessions. Before you leave the meeting, complete a General Evaluation form, available at the AACAP Registration Counter, and pick up your CME certificate.



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DEADLINE FOR RETURN: IN OFFICE BY SEPTEMBER 15 Important: Carefully read the instructions and procedures on previous pages before completing this form.

Registration Fee Schedule (please check one)

Members	Regular (by Sept. 15)	Late/ On-Site	Non-Members	Regular (by Sept. 15)	Late/ On-Site
<input type="checkbox"/> Member Registration	\$ 190	\$ 265	<input type="checkbox"/> Non-Member Registration	\$ 440	\$ 515
<input type="checkbox"/> Member Presenters	\$ 190	\$ 265	<input type="checkbox"/> Non-Member Joining AACAP	\$ 615	N/A
<input type="checkbox"/> Member Residents	\$ 80	\$ 155	<input type="checkbox"/> Single Day Registration	\$ 225	\$ 230
<input type="checkbox"/> Member Medical Student	\$ -0-	\$ -0-	Specify day: _____		
			<input type="checkbox"/> Monitors <i>(special application required)</i>	\$ -0-	\$ -0-
Registrant's Guest(s)			<input type="checkbox"/> Medical Student <i>(I.D. required, must be attached)</i>	\$ -0-	\$ -0-
<input type="checkbox"/> Spouse/Guest <i>(social activities only)</i>	\$ 55	\$ 55	<input type="checkbox"/> Resident <i>(I.D. required, must be attached)</i>	\$ 80	\$ 155
Badge Name: _____			<input type="checkbox"/> Presenter <i>(non-psychiatrists)</i>	\$ 90	\$ 105
Spouse/Guests who want CME credit must complete their own registration form.			<input type="checkbox"/> Presenter <i>(psychiatrists)</i>	\$ 440	\$ 515
			<input type="checkbox"/> Exhibitor <i>(special application required)</i>		

DEADLINE FOR RETURN: SEPT 15. Print or type all information. Instructions on page 67

General Registration Form

AACAP Member? Yes, member ID# (if known) _____ No

AMPI Member? Yes, member ID# (if known) _____ No

Are you a physician? Yes No

Name: _____
FIRST MI LAST M.D. D.O. Ph.D. other _____

Address: _____
STREET/P.O. BOX New Address? Yes

CITY STATE ZIP COUNTRY

Phone: _____
WORK HOME EMERGENCY TELEPHONE AND CONTACT NAME

Fax: _____ E-Mail: _____

I want to receive all future AACAP mailings at this address (includes Journal and billing.) Yes No

First Time Attending Meeting? Yes No

In which hotel will you be staying? San Diego Marriott Other (Please specify): _____

Do you spend 20 hours or more per year in face to face time with medical students (teaching, mentoring, etc.)? Yes No

Payment by Credit Card: Visa Mastercard American Express
"I authorize AACAP to charge the total monies due."

Account No.: _____

Expires: _____ Total Amount: _____

SIGNATURE: _____

By registering for this meeting, registrant grants AACAP and its sublicensee(s) the right to record his/her presentation, remarks, appearance, or other participation, and to reproduce and distribute such recording by any means and for any purpose without payment to the registrant. Registrant also agrees that it will not reproduce, distribute, summarize, adapt, publicly perform, or publicly display any presentation or accompanying materials, in whole or in part, for commercial purposes, without prior written authorization from the copyright owner(s), nor will registrant use the AACAP name or logo in connection with any commercial use of such materials without written authorization from AACAP.

Please sign acknowledging that you understand this paragraph. Signature Required _____

Additional Services: If you have specific needs for facilities, visual or audio aids, or dietary requirements, please indicate below or attach additional information and an AACAP staff member will contact you. _____

For Office Use Only

CC: check: _____ by: _____

Payment Processed Date: _____

by: _____

Batch #: _____ by: _____



Name: _____ Tel: _____

E-Mail: _____ Fax: _____

EVENT FILLED? PICK AN ALTERNATE!

In the event a ticketed item I picked is full, please register me for the following:
(in order of priority)

- 1) _____
- 2) _____
- 3) _____

TICKETED EVENTS

Ticketed events are subject to availability and will be distributed on a first-come basis. Space is limited.

	Members			Non-Members		
	By 9/15	#Tks	Total	By 9/15	#Tks	Total
Clinical Practicum 1 (Tues., Oct. 24) <i>Beyond the Pill: Social Context and Psychiatric Symptoms</i> (limited to 30)	\$110					
Clinical Practicum 2 (Tues., Oct. 24) <i>School-Based Intervention for Autistic Spectrum Disordered Youth: Integrative Service Models from Preschool through the High School Years</i> (limited to 30)	\$110					
Training Directors Reception/Dinner (Thurs., Oct. 26)	\$75			\$75		
If received after Sept. 16	\$110			\$110		
Medical Student, Resident, and Early Career Psychiatrist Breakfast (Fri., Oct. 27)	\$15			\$15		
Early Career Psychiatrist Focus Group (Fri., Oct. 27)	\$0			\$0		

INSTITUTES

	Members			Non-Members		
	By 9/15	#Tks	Total	By 9/15	#Tks	Total
1. Advanced Psychopharmacology Institute (Tues., Oct. 24)	\$120			\$240		
2. Adolescent Substance Use Disorders: Evidence-Based Management (Wed., Oct. 25)	\$120			\$240		
3. Adolescents: Mentalizing Capabilities Fact or Fiction? (Thurs., Oct. 26)	\$120			\$240		
4. Psychiatric Assessment of Preschoolers: Practical Models, Methods, and Tips for Clinicians (Thurs., Oct. 26)	\$120			\$240		
5. New Advances in Treating Traumatized Children (Fri., Oct. 27)	\$120			\$240		
6. Integrating Diagnostic, Pharmacologic, and Behavioral Interventions for Autism Spectrum Disorders (Fri., Oct. 27)	\$120			\$240		
7. Maintenance of Certification Module 3 (Sat., Oct. 28)	\$120			\$240		
8. Practical Pediatric Psychopharmacology for Primary Care Clinicians (Sun., Oct. 29)	\$120			\$240		

CLINICAL CONSULTATION BREAKFASTS

Limited to 15 registrants each session. Mark only one per day

	Members			Non-Members		
	By 9/15	#Tks	Total	By 9/15	#Tks	Total
Wed., Oct. 25 (7:00–8:30 a.m.)						
1. Clinical and Practical Issues in Rural Child Psychiatry	\$55			\$55		
2. Master Clinician Lenore C. Terr, M.D.	\$55			\$55		
3. Issues in Deafness and Child Mental Health	\$55			\$55		
4. Master Clinician Margaret D. Weiss, M.D., Ph.D., FRCPC	\$55			\$55		
Thurs., Oct. 26 (7:00–8:30 a.m.)						
5. Master Clinician Michael A. Strober, Ph.D.	\$55			\$55		
6. Sexual Orientation: Clinical Issues and Strategies for the Child Psychiatrist	\$55			\$55		
7. Religion and Spirituality in Clinical Practice	\$55			\$55		
8. Master Clinician Robert S. Pynoos, M.D.	\$55			\$55		
Fri., Oct. 27 (7:00–8:30 a.m.)						
9. Master Clinician Allan Josephson, M.D.	\$55			\$55		
10. Treating Psychiatric Disorders in Children with Significant Neurological/Medical Conditions	\$55			\$55		
11. Answers for Your CPT Coding Questions	\$55			\$55		
12. Ethical Issues in Child and Adolescent Psychiatry	\$55			\$55		

SPECIAL INTEREST STUDY GROUPS

Limited to 25 registrants. Select only one.

	Members			Non-Members		
	By 9/15	#Tks	Total	By 9/15	#Tks	Total
Fri., Oct. 27 (4:30–6:00 p.m.)						
1. Tourette's Syndrome	\$20			\$25		
2. Sports the American Religion: Comprehending Sports from a Theological Perspective	\$20			\$25		
3. Animal Assisted Therapy	\$20			\$25		
4. Update on Family Therapy and Family Assessment	\$20			\$25		
5. College and Student Mental Health	\$20			\$25		
6. Integrating Pediatric and Behavioral Health Care for Children and Adolescents	\$20			\$25		
7. From Asperger's Disorder to Pediatric Bipolar Disorder	\$20			\$25		
8. Pharmacotherapy of Autism Spectrum Disorders	\$20			\$25		
9. Developing a U.S. Child and Adolescent Inpatient Psychiatry Network	\$20			\$25		
10. Psychiatrists Parenting Autistic Spectrum and Intellectually Disabled (Mentally Retarded) Children	\$20			\$25		
11. Practice-Based Clinical Trials	\$20			\$25		
12. Career Paths for Women in Child Psychiatry	\$20			\$25		
13. Pharmacotherapy of Child and Adolescent Depression	\$20			\$25		
14. Pharmacotherapy of Children and Adolescents with ADHD	\$20			\$25		
15. Bipolar Disorder	\$20			\$25		
16. New Directions in Community-Based Systems of Care	\$20			\$25		

WORKSHOPS

Limited to 25 registrants. Circle only one in each grouping.

	Members			Non-Members		
	By 9/15	#Tks	Total	By 9/15	#Tks	Total
Wednesday 8:00–11:00 a.m.						
A	\$0			\$0		
Wednesday 8:00–11:00 a.m.						
B C D	\$60			\$100		
Wednesday 1:00–4:00 p.m.						
E F G H	\$60			\$100		
Thursday 8:00–11:00 a.m.						
I J K L	\$60			\$100		
Thursday 2:00–5:00 p.m.						
M N O P	\$60			\$100		
Friday 8:00–11:00 a.m.						
Q R S T	\$60			\$100		
Friday 1:00–4:00 p.m.						
U V W	\$60			\$100		
Saturday 9:30 a.m.–12:30 p.m.						
X Y Z	\$60			\$100		
Saturday 1:30–4:30 p.m.						
AA BB CC	\$60			\$100		

Registration Fee (from front)	\$ _____
Additional Fees (this side)	\$ _____
TOTAL FEES DUE	\$ _____

**Please complete this section before submitting. Thanks.*

