

55th Annual Convention | On Demand

FOR OFFICE USE ONLY

Member Student Member Comm Practitioner
Postbac Nonmember Student Nonmember Comp

● If paying by credit card (Visa, MasterCard, or American Express) register on-line at www.abct.org or by fax (212-647-1865)

● If paying by check, mail to:
ABCT, 305 Seventh Avenue, 16th floor, New York, NY 10001

→ Member number: _____

→ Primary email: _____

Day Phone: _____ Cell: _____

Badge Information (please print)

First Name	Last Name
Pronouns	
Institution	Highest Degree

Mailing Information

Department or Program _____

Institution _____

Address _____

City _____ State/ Province _____ Zip Code _____

Check here if you require special accessibility or accommodations. Please email any special requirements to convention@abct.org

Ticketed Sessions

PLEASE CHECK DESIRED SESSIONS

D Institutes

7-hour

Ins 1: Children and Adolescents with ADHD

5-hour | 1:00 p.m.–6:00 p.m.

Ins 3: Transdiagnostic Sleep & Circadian Problems

Ins 5: Using Focused ACT in Primary Care

Ins 7: Treating Childhood Anxiety Using PCIT

E Master Clinician Seminars

MCS 1: Tx Childhood Anxiety During COVID

MCS 5: Using VR to Treat Anxiety

MCS 7: CBT for OCD in Children and Adolescents

MCS 8: OCD and Comorbidity

* Special Session (sponsored by APA and ABCT)

Special Session: Providing Care for the Unvaccinated

TOTAL TICKETS _____

Convention

For a listing of Workshops, go to **Ticketed Sessions** at www.abct.org/conv2021

F Workshops

Please insert the workshop numbers (i.e., "4" for Workshop 4) for those you wish to attend. Also note the total number of tickets desired and use that number on the reverse. Because workshops fill early, PLEASE list alternative choices.

w o r k s h o p s	Day	Time	1st Choice	2nd Choice
	FRIDAY	AM		
		PM		
	SATURDAY	AM		
PM				
M C S	1st Choice	2nd Choice	3rd Choice	4th Choice

TOTAL TICKETS _____

Specialty (please check one) Psychology Addictions Counseling
 Counseling Social Work School/Education Psychiatry
 Primary Care Marriage & Family Therapy
 Other _____
Level (Please check one) Professional Student

■ Student rates are for full-time students, residents, or interns; please send ID to verify your status as a student.

Register

	* ABCT Member	Non-Member	* ABCT Student Member	Student Non-Member	* Post-Baccalaureate Professional Member	**Professional Community Practitioner	# Tickets	Total
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A On Demand Registration	\$340	\$670	\$140	\$240	\$180	\$215		
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Indicate Choices on Reverse

D 5-Hour Institutes	\$140	\$170	\$110	\$120	\$115	\$125	<input type="text"/>	<input type="text"/>
7-Hour Institute	\$185	\$240	\$150	\$165	\$155	\$160	<input type="text"/>	<input type="text"/>

E Master Clinician Seminars	\$95	\$115	\$75	\$85	\$80	\$90	<input type="text"/>	<input type="text"/>
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F Workshops	\$80	\$108	\$65	\$75	\$70	\$75	<input type="text"/>	<input type="text"/>
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* Special Session	\$95	\$115	\$75	\$85	\$80	\$90	<input type="text"/>	<input type="text"/>
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■ **Donations** — Support two awards, the Francis C. Sumner Excellence Award, and the Student Travel Award. Donations will be split evenly between the two awards.
 \$10 \$20 \$50 \$100 \$200 other amount _____

■ **CE** \$99 Please check appropriate organization: Psychology-APA NBCC CAMF

* **ABCT Members, Student Members, and Post-Baccalaureate Professional Members:** Please remember that the ABCT membership year is November 1, 2021, to October 31, 2022. As the Convention takes place in November, you are required to pay your 2022 dues before registering. WCCBT members who are not American or Canadian may register at the ABCT member rate. WCCBT Member organizations: AACBT; ABCT; ACBTA ; EABCT, IACP; ALAMOC.

** **Professional Community Practitioner:** Nonmembers who are first-time attendees to the convention, or who have not attended in the last 10 years. ABCT is being more inclusive in it outreach to the community. Rate does not include doctoral-level clinicians (e.g., psychologists, physicians).

Total Fees

Visa | MasterCard | American Express

Name on Card (please print)

Card Number CVV Expiration Date

Signature