

58th Annual Convention

REGISTRATION • November 14–17, 2024

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 for arrival date of October 11 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

Here's how it works:

Pre-Convention events (see **B–D** below) take place on Thursday and are TICKETED sessions.

MCS & Workshops (**E & F** below) are also TICKETED sessions, but they take place on Friday and Saturday.

General Registration gives you access to all of the Symposia, Clinical Round Tables, Posters, Panel Discussions, Special Sessions, Invited Addresses, Friday through Sunday. These sessions do not require tickets. If you want to attend the General Convention only, fill in area A on the reverse. If you also want to attend ticketed sessions, mark your choices below and complete the registration form on the reverse.

Or: **register on-line at www.abct.org**

→ **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

Pre-Convention Activities

PLEASE CHECK DESIRED SESSIONS

B Clinical Intervention Training

4 hours | 8:30 a.m.–12:30 p.m.

CIT 1: Understanding Digital Mental Health Tools and Their Integration Into Cognitive and Behavioral Treatments (Schueller)

C AMASS 4 hours | 8:00 a.m.–12:00 p.m. or 1–5:00 p.m.

AMASS 1: Harnessing Innovative Precision Medicine Methods to Improve Digital Mental Health Interventions (Zainal & Van Doren)

AMASS 2: Understanding Community Needs: Implementation Science Approach (Martinez & Frank)

D Institutes 7 hours | 8:30 a.m.–5:00 p.m.

Ins 1: Focused ACT for Brief Interventions (Strosahl & Robinson)

Ins 2: Practice & Ethics of Exposure-Based CBT for Youth Anxiety (Albano & Piacentini)

D Institutes

5 hours | 8:00 a.m.–1:00 p.m. or 1:30 p.m.–6:30 p.m.

Ins 4: Affirming CBT for Transgender & Gender-Diverse Clients (Hope & Woodruff)

Ins 5: Comorbid Insomnias: Beyond Sleep Hygiene (Carney)

Ins 6: Cognitive Therapy for Suicide Prevention (Green & Jager-Hyman)

Ins 7: ACT Strategies for Eating Disorders Treatment (Merwin & Moskovich)

Indicate number of your first and second choices here:

1st choice: Ins _____

2nd choice: Ins _____

E Master Clinician Seminars 2 hours

MCS 1: Managing Therapy-Interfering Behavior in DBT (Shaller)

MCS 2: Using Neuroscience in the CBT Clinic (Siegle)

MCS 3: Pediatric OCD: Common Clinical Problems and Empirically Informed Recommendations (Franklin & Piacentini)

MCS 4: Supervision Essentials for CBT (Newman)

MCS 5: Empowering Parents of Youth With Anxiety: Breaking the Vicious Cycle of Overprotection (Albano & Angelosante)

TOTAL TICKETS _____

Convention

For a listing of Workshops, go to **Ticketed Sessions** at www.abct.org/2024-convention/

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				

MCS	1st Choice	2nd Choice	3rd Choice	4th Choice
S				

TOTAL TICKETS _____

▶ Register

- No refunds will be honored after the Oct. 15 deadline.
- Student rates are for full-time students, residents, or interns: please send ID to verify your status as a student.

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

	* ABCT Member Academic	* ABCT Member Licensed Professional	Non-Member Academic	Non-Member Licensed Professional	ABCT Student Member	Student Non-Member	Post-baccalaureate	** Community Practitioner	*** Low-Income Developing Country	**** Middle-Income Developing Country	# Tickets	TOTAL
Preregistration Received by Oct. 15	\$355	\$454	\$700	\$799	\$140	\$245	\$185	\$225	\$89	\$178		
Late/Onsite Reg. Received after Oct. 15	\$415	\$514	\$770	\$869	\$170	\$270	\$220	\$255	\$104	\$208		
<i>Indicate Choices on Reverse</i>												
B CIT												
CIT 1 (Schueller) <i>4 hours</i>	\$125	\$125	\$145	\$145	\$100	\$115	\$125	\$135	\$31	\$62		
C AMASS												
AMASS 1 or 2	\$125	\$125	\$145	\$145	\$100	\$115	\$125	\$135	\$31	\$62		
D 5-Hour Institutes	\$140	\$140	\$170	\$170	\$110	\$120	\$115	\$125	\$35	\$70		
7-Hour Institute	\$185	\$185	\$240	\$240	\$150	\$165	\$155	\$160	\$46	\$92		
E Workshops	\$80	\$80	\$108	\$108	\$65	\$75	\$70	\$75	\$20	\$40		
F Master Clinician Seminars	\$95	\$95	\$115	\$115	\$75	\$85	\$80	\$90	\$24	\$48		
■ Donations — Support two awards, the Francis C. Sumner Excellence Award, and the Student Travel Award. Donations will be split evenly between the two awards. <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200 <input type="checkbox"/> other amount ____												

* **ABCT Members, Student Members, and Post-Baccalaureate Professional Members:** Please remember that the ABCT membership year is November 1, 2024, to October 31, 2025. As the Convention takes place in November, you are required to pay your 2025 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. First-time ABCT attendees who are also attending the ISITDBT Conference on Thursday, November 14 may register at the ABCT member academic or licensed professional rate.

** **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 its outreach to the community. Rate does not include doctoral-level clinicians (e.g., psychologists, physicians). The Community Practitioner rate does not include CE.

*** As indicated by the World Bank.

▶ **Continuing Education:** The Licensed Professional rate includes CE; the Academic rate does not include CE. Please indicate your CE here: APA NASW CAMFT NBCC NYS Psychology NYS Social Work

Total Fees

<div style="background-color: black; color: white; padding: 2px; border-radius: 10px; display: inline-block;"> Visa MasterCard American Express </div>			
Name on Card (please print)		Zip code for billing	
Card Number	CVV	Expiration	
Date			

Demographic Questions

ABCT is collecting additional information about our attendees to better serve them.

Registrant Name: _____

Do you need Continuing Education Credits?

Yes ___ No ___

Registrant Category

- Academia
- Non-Member
- Student Non-Member
- Professional Community (nonmembers who are first-time attendees to the convention, or who have not attended in the last 10 years)
- Licensed CE Professional (rate includes continuing education credits)
- Professional Community—Licensed CE Professional (nonmembers who are first-time attendees to the convention, or who have not attended in the last 10 years. Rate includes continuing education credits.)

Undergraduate Group Rate

If you are purchasing for an undergraduate student group, please select the option below. A promo code will be generated and visible on the confirmation page. Use this code to register all students in the group or issue the code for student self-registration. Students must show a valid college ID to pick up their badges.

- 1 to 5 passes (\$120 each) — \$600
- 6 to 10 passes (\$115 each) — \$1,150.00
- 11 to 20 passes (\$110 each) — \$2,200.00
- 21 to 30 passes (\$105 each) — \$3,150.00

****PLEASE SUBMIT A FORM FOR EACH ATTENDEE****
if you don't register online

Specialty (select one):

- Addiction Counselor
- Counselor
- Marriage and Family Therapist
- Primary Care
- Psychiatry
- Psychology
- School/Education
- Social Work
- Other

Professional Level:

- Professional
- Student/Post Doc

What is your race?

- Asian/Asian American/Pacific Islander
- Black/African American
- Native American/Alaskan Native
- White/Caucasian/European American
- Other
- Prefer not to disclose

What is your ethnicity?

- Hispanic, Latinx, or Spanish origin
- Middle Eastern or North African (MENA)
- Non-Hispanic/Non-MENA
- Prefer not to disclose

What is your gender?

- Woman—cisgender
- Woman—transgender/trans woman
- Man—cisgender
- Man—transgender/trans man
- Nonbinary
- Genderqueer
- Agender
- Not listed
- Wish not to disclose

What are your pronouns?

- She/her
- He/him
- Ze/Zim
- They/them
- Other (please specify)
- Prefer not to disclose

Please complete and submit all three pages of this registration form when you fax (212-647-1890) or email to convention@abct.org