

59th Annual Convention

REGISTRATION • November 20–23, 2025

- 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 10 to:
ABCT, 305 Seventh Avenue, 16th floor, New York, NY 10001

→ **Member number:** _____

→ **Primary email:** _____

Day Phone: _____ **Cell:** _____

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, Open Paper Sessions, Clinical Round Tables, Posters, Panel Discussions, Special Sessions, Invited Plenaries, 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

FOR OFFICE USE ONLY

Member Student Member Comm Practitioner
Postbac Nonmember Student Nonmember Comp

→ 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

Pre-Convention Activities

PLEASE CHECK DESIRED SESSIONS

B Clinical Intervention Training

Full day | 8:30 a.m.–5:00 p.m.

- ☐ **CIT:** Including Partners in the Treatment of Depression and Anxiety/Fear-based Disorders: A Couple-Based Approach (Baucom & Kane)

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

- ☐ **AMASS 1:** Introduction to Multilevel Modeling (Cain)
☐ **AMASS 2:** Optimizing the Use of Discrepant Results When Using, Interpreting, and Integrating Assessment Data (De Los Reyes et al.)

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

- ☐ **Ins 1:** Compassion-Focused ERP in CBT (Tirch & Tirch)
☐ **Ins 2:** Optimizing Exposure Therapy for Anxiety Through Inhibitory Learning (Abramowitz & Jacoby)

D Institutes

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

- ☐ **Ins 3:** Acceptance and Commitment Therapy for Moral Injury (Borges et al.)
☐ **Ins 4:** Present-Moment Power Moves: Working the Center Pillar in ACT (Strosahl & Robinson)
☐ **Ins 5:** Targeting Emotional Loneliness Using Radically Open Dialectical Behavior Therapy (Fritsinger et al.)

Indicate number of your first and second choices here:

1st choice:

Ins _____

2nd choice:

Ins _____

E Master Clinician Seminars 2 hours

- ☐ **MCS 1:** CBT Strategies to Help Clients Getting out of Bed (Carney)
☐ **MCS 2:** Neuroaffirming CBT for Autistic Individuals (Hong)
☐ **MCS 3:** Telling People's Stories Through CBT: Case Conceptualization for Advanced Clinicians (Chu & Pimentel)
☐ **MCS 4:** LGBTQ-Affirmative CBT (Sullivan & Harkess)

Convention

For a listing of Workshops, go to **Ticketed Sessions** at www.abct.org/2025-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.

TOTAL TICKETS _____

Day	Time	1st Choice	2nd Choice
FRIDAY	AM		
	PM		
SATURDAY	AM		
	PM		

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

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- baccalau- reate	** Community Mental Health Worker	*** Low-Income Developing Country	**** Middle- Income Developing Country	# Tickets	TOTAL
Late/Onsite Reg. Received after Oct. 15	\$415	\$514	\$770	\$869	\$170	\$270	\$220	\$285	\$104	\$208		
Indicate Choices on Reverse												
B CIT												
CIT 1 <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		
Benefit Luncheon "ABCT: Your Professional Home, Our Shared Future" • Sat., Nov. 22, 12 noon–1:30 pm <input type="checkbox"/> \$160 – Individual Ticket (ABCT member) <input type="checkbox"/> \$240 – Mentor Tandem Ticket , two tickets (if the second registrant is a student ABCT member) <input type="checkbox"/> \$100 – Reduced Rate Individual Ticket (for New Professional, Student or other early-career ABCT members) <input type="checkbox"/> \$185 – Non-Member Ticket (not ABCT members) <input type="checkbox"/> \$1500 – Reserve a Table: 8 Individual tickets, marked "reserved table," including 8 drink/alcohol vouchers. Nine (9) total seats—one seat set aside for an ABCT leader.												
Continuing Education: The Licensed Professional rate includes CE; the Academic rate does not include CE. Please indicate your CE here: <input type="checkbox"/> APA <input type="checkbox"/> CAMFT <input type="checkbox"/> NBCC <input type="checkbox"/> NYS Psychology <input type="checkbox"/> NYS Social Work												

* **All ABCT Members:** Please remember that the ABCT membership year is November 1, 2025 to October 31, 2026. As the Convention takes place in November, you are required to pay your 2026 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 Mental Health Worker:** 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).

*** As indicated by the World Bank.

★ Includes CE

Total

Visa | MasterCard | American Express

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 meetings@abct.org