



VIRGINIA PSYCHIATRIC REHABILITATION ASSOCIATION

VAPRA Conference Registration Form

December 15th – 17th 2010

Fairfax, Virginia

REGISTRATION FEES – CHECK ONE:

- \$95 Virginia VAPRA Member (includes tee-shirt, continental breakfast on Thursday, banquet, and continental breakfast Friday morning for those who attend the business meeting).
- \$105 Non-Member (includes all of the above)
- \$85 reduced rate for CPRP – please supply membership ID number for verification

- _____
- \$60 Single Day Rate
- \$15 Late Registration (*After Nov. 9, 2010*) **By Board action, no late fees will be waived.**

Total Amount Entered Here: \$ _____

PLEASE CHECK ALL THAT APPLY:

- Consumer
- Mental Health Professional
- Advocate
- Family member
- Other _____

_____ Check here if you want to attend the banquet on Thursday evening.

Please neatly print your name below as you wish it to appear on your nametag.

NAME: _____

NAME OF PROGRAM / AGENCY: _____

STREET or PO ADDRESS: _____

CITY: _____ STATE: _____ ZIP _____

PHONE: _____ FAX _____

EMAIL: _____

Note needs for special accommodations: _____

Make Checks Payable to VAPRA and Mail To:

**Justin Sheets, c/o The Marshall Center
4303 W. Broad Street
Richmond, VA 23230**

Phone: 804-780-8635 E-mail: sheetsj@rbha.org Fax: 804-780-4432

INVOICES: This “**Conference Registration Form**” serves as your invoice. **REFUNDS:** Refunds are available, minus a \$25 handling fee, for written cancellations received prior to Nov. 9, 2010. No refunds will be made after this date.