



# 2017 Ohio Psychological Association Annual Convention

## REGISTRATION FORM

**REGISTRATION DEADLINE IS APRIL 18, 2017**

ATTENDEE INFORMATION: *One registration form per attendee.*

|                                          |                                                                             |                  |                                     |
|------------------------------------------|-----------------------------------------------------------------------------|------------------|-------------------------------------|
| <b>Name &amp; Degree:</b> (Please print) |                                                                             | <b>License #</b> |                                     |
| <b>Mailing Address:</b>                  | <b>Counselor or Social worker Credit?</b> (See reverse for CE restrictions) |                  | <input type="checkbox"/> Yes        |
|                                          |                                                                             |                  | <input type="checkbox"/> No         |
| <b>Email Address:</b>                    | <b>Special Dietary Request:</b>                                             |                  | <input type="checkbox"/> Vegan      |
| <b>Are you a speaker?</b>                | <input type="checkbox"/> Yes <input type="checkbox"/> No   Workshop # _____ | Other<br>_____   | <input type="checkbox"/> Vegetarian |
| <b>Phone Number:</b>                     |                                                                             |                  | <input type="checkbox"/> GF         |

**WORKSHOP AND SPECIAL EVENT SELECTIONS** *Check the boxes next to the sessions/events you want to attend.*

| Day                    | 9-10 a.m.<br>1 CE Credit             | 10:15 a.m.-12:15 p.m.<br>2 CE Credits | LUNCH                                                               | 1:45-5:00 p.m.<br>3 CE Credits                                                                           | RECEPTION                                                   | DAILY CE TOTAL |
|------------------------|--------------------------------------|---------------------------------------|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|----------------|
| Wednesday,<br>April 26 | <input type="checkbox"/> Keynote     | <input type="checkbox"/> Workshop 1   | 1 CE<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Workshop 4                                                                      | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |                |
|                        |                                      | <input type="checkbox"/> Workshop 2   |                                                                     | <input type="checkbox"/> Workshop 5                                                                      |                                                             |                |
|                        |                                      | <input type="checkbox"/> Workshop 3   |                                                                     | <input type="checkbox"/> Workshop 6                                                                      |                                                             |                |
| Thursday<br>April 27   | <input type="checkbox"/> Workshop 7  | <input type="checkbox"/> Workshop 10  | 1 CE<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No | <input type="checkbox"/> Workshop 13                                                                     | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |                |
|                        | <input type="checkbox"/> Workshop 8  | <input type="checkbox"/> Workshop 11  |                                                                     | <input type="checkbox"/> Workshop 14                                                                     |                                                             |                |
|                        | <input type="checkbox"/> Workshop 9  | <input type="checkbox"/> Workshop 12  |                                                                     | <input type="checkbox"/> Workshop 15                                                                     |                                                             |                |
| Friday,<br>April 28    | <input type="checkbox"/> Workshop 16 | <input type="checkbox"/> Workshop 19  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No         | <input type="checkbox"/> Workshop 22                                                                     |                                                             |                |
|                        | <input type="checkbox"/> Workshop 17 | <input type="checkbox"/> Workshop 20  |                                                                     | <input type="checkbox"/> Workshop 23                                                                     |                                                             |                |
|                        | <input type="checkbox"/> Workshop 18 | <input type="checkbox"/> Workshop 21  |                                                                     | <input type="checkbox"/> Workshop 24                                                                     |                                                             |                |
|                        |                                      |                                       |                                                                     | <input type="checkbox"/> Workshop 25 (1 CE) / W26 OPAGS<br>\$35 Mem.   \$20 Student Mem.   \$45 Non-mem. |                                                             |                |

**FEES & PAYMENT INFORMATION:** *Registration Ends on April 18, 2017*

**IMPORTANT NOTICES:** 1) See the back of this page for information on our **change fee, cancellation policy** and **membership levels**. Students who are not members should call OPA (614.224.0034) before registering to receive one year of **FREE OPA Membership**.

|                             | <input type="checkbox"/> 3-Day Package | <input type="checkbox"/> 2-Day Package | <input type="checkbox"/> 1-Day Package | <input type="checkbox"/> Custom Package<br>(Rates are per (1) CE earned.) |
|-----------------------------|----------------------------------------|----------------------------------------|----------------------------------------|---------------------------------------------------------------------------|
| OPA Full Member             | \$620                                  | \$440                                  | \$250                                  | \$35                                                                      |
| OPA Partner Member (No CE)  | \$480                                  | \$340                                  | \$190                                  | \$25                                                                      |
| OPA Student Members (No CE) | \$300                                  | \$200                                  | \$110                                  | \$15                                                                      |
| Non-OPA Member              | \$900                                  | \$610                                  | \$310                                  | \$45                                                                      |

|                                                                             |            |                                                                                                                                                                                                                            |                                                                                                 |               |
|-----------------------------------------------------------------------------|------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|---------------|
| Enter Registration Fee                                                      | \$ _____   | <b>PAYMENT OPTIONS:</b>                                                                                                                                                                                                    |                                                                                                 |               |
| Custom Package Convenience Fee \$40                                         | + \$ _____ | <input type="checkbox"/> Bill Me                                                                                                                                                                                           | <input type="checkbox"/> Credit Card                                                            |               |
| Custom Package Add-Ons:<br>Lunch \$30@ / Reception \$20@                    | + \$ _____ | <input type="checkbox"/> Check Enclosed<br>(Made payable to the OPA)                                                                                                                                                       | <input type="checkbox"/> Visa <input type="checkbox"/> AMEX <input type="checkbox"/> MasterCard |               |
| OPA-PAC Donation (Optional)                                                 | + \$ _____ | Completed registration forms can be: mailed to OPA, 395 E. Broad St. #310, Columbus, OH 43215, faxed to 614.224.2059, or visit <a href="http://www.ohpsych.org">www.ohpsych.org</a> to register online with a credit card. | _____                                                                                           |               |
| Less OPA CE Coupon (if applicable)<br>Enter Promo Code: _____               | - \$ _____ |                                                                                                                                                                                                                            | Account Number                                                                                  |               |
| Less \$40 Early Bird Discount (if postmarked by 4/5/17)                     | - \$ _____ |                                                                                                                                                                                                                            | Expiration Date                                                                                 | Security Code |
| Less \$20 Pre-Registration Discount (if postmarked between 4/6/17- 4/18/17) | - \$ _____ |                                                                                                                                                                                                                            | Signature                                                                                       |               |
| <b>TOTAL AMOUNT DUE:</b>                                                    | \$ _____   |                                                                                                                                                                                                                            |                                                                                                 |               |

## All New Inclusive Packages

### What's Included...

Based on attendee input, OPA has revamped our convention pricing structure. It's simple and cost effective... no more extra fees for meals, receptions or special events! See what's included in each package.

### 3-Day Full Convention Package :

- 3 Continental breakfasts & lunches 2 CE
- 9 sessions 16-18 CE
- 2 receptions
- Poster session admission
- Promo code for OPA Webinars (3 CE)

### 2-Day Package:

(Options vary based on which two days selected.)

- 2 Continental breakfasts & lunches 1-2 CE
- 6 sessions 10 - 12 CE
- 2 receptions OR 1 reception and poster session admission

### 1-Day Package:

(Options vary based on which day selected.)

- Continental breakfast & lunch 0-1 CE
- 3-4 sessions 4-6 CE
- Reception OR poster session admission

### Custom Package Pricing:

If an inclusive package is not for you, we also offer Custom Package (A la Carte) pricing. With this option, you pay a rate per (1) CE earned. Lunches and receptions may also be added to a custom package for an additional fee. A \$40 convenience fee is assessed for the custom package option.

## Membership & Pricing Levels

### OPA Full Members

Licensed/Non-Licensed with Doctoral Degree

### OPA Partner Members (No CE)

Professional without a doctoral degree working in field of Psychology or Individual / Organization who wishes to support/advance the purpose of OPA and the field of psychology in Ohio

### OPA Student Members (No CE)

High School / College Undergraduate & Graduate levels / Post-doc program under supervision

Students who are not OPA members are encouraged to call us PRIOR to registering to receive a Promo Code for **1 FREE year of membership** & member pricing eligibility.

### Non-OPA Members

## Policies & Procedures

### IMPORTANT REGISTRATION DATES:

**Hotel Reservation Deadline** ----- **March 31**  
**Early Bird Deadline** ----- **April 5**  
**Registration Deadline** ----- **April 18**

**Registration Deadline:** Participants are encouraged to register early. Registration must be received on or before April 18 to guarantee workshop / event selections. Registrations received after this date will be processed on-site, and first selections and/or meals can not be guaranteed.

**Discounts:** Registrations received or postmarked on or before April 5 receive a **\$40 Early Bird Discount**. Registrations received or postmarked between April 6 and April 18 receive a **\$20 Pre-Registration Discount**. OPA members may use their CE Coupon by entering the Promo Code online or on the paper form. **No discounts maybe used after April 18, 2017.**

**Change Fee:** Any changes in workshop/ event selections made after April 18 will be subject to a **\$20 change fee**.

### Disclaimers/Cancellation and Refund

**Policy:** Attendees needing to cancel must do so in writing on or before April 18 and will be subject to a **\$30 service charge**. **ALL CANCELLATIONS WILL BE SUBJECTED TO THIS SERVICE CHARGE.** No refunds will be given for cancellations made after **April 18**. OPA and sponsors of this event are committed to providing accurate and up-to-date information. However, they are not responsible for event changes, additions or deletions, but will work towards accommodating attendee needs.

**Conflict of Interest Statement:** As an APA-approved sponsor of continuing education, the Ohio Psychological Association (OPA) is committed to the identification and resolution of potential conflicts of interest in the planning, promotion, delivery, and evaluation of continuing education as is consistent with concepts outlined in the APA Ethical Principles of Psychologists and Code of Conduct. Information regarding financial support, in-kind support or possible conflicts of interest will be included in promotional materials and can be accessed by contacting the Ohio Psychological Association Central Office.

**Americans with Disabilities Act:** The Quest Conference Center complies with the provisions of ADA. If you need any assistance related to sight, sound or mobility, please contact OPA; so that, we may assist you.

**Photo Consent:** Registration/attendance at OPA events constitutes an agreement by the registrant to OPA for use of the attendee's image in photographs.

**Special Requests:** Please let us know if you have any special requests, including dietary restrictions or request for a nursing mother's room.

### Continuing Education Credit Policies:

Those individuals wanting CE credits must sign and complete the Workshop Evaluation Form and return the it to OPA at the end of each workshop as instructed. APA guidelines state that a participant may arrive no more than 10 minutes late or leave more than 10 minutes early to receive credit for a program. As an APA-Approved Sponsor, OPA adheres to this guideline. No partial credit will be given. The Convention planners will make every effort to ensure that each workshop begins and ends at its designated time.

### Convention Certificates of Attendance:

Certificates will list each workshop completed and will be sent to participants following the Convention. Please allow 3 weeks for delivery.

**Continuing Education Credits:** 1) The Ohio Psychological Association is approved by the American Psychological Association to offer continuing education for psychologists. The Ohio Psychological Association maintains responsibility for the program and its content. 2) The Ohio Psychological Association is approved by the State of Ohio Counselor, Social Worker and Marriage & Family Therapist Board to offer continuing education to counselors and social workers. The approval number is RCS070608. **NOTE: The following workshops are offered for counselor or social worker continuing education credits: 3, 4, 5, 7, 8, 9, 10, 12, Thursday Lunch CE Program, 14, 15, 16, 17, 18, 19, 20, 22 and 23.**