

# American Psychopathological Association Registration & Dues Form

107<sup>th</sup> Annual Meeting: *Personality and Personality Disorders:  
Foundations of Pathology, Pathways to Health*

March 2-4<sup>th</sup>, 2017

Crowne Plaza Time Square, 1605 Broadway, 49<sup>th</sup> Street, New York, NY  
(212) 977-4000

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**STEP 1: Name & Address**

First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_ Last Name: \_\_\_\_\_ Degree: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Affiliation for meeting badge (25 characters): \_\_\_\_\_

This is a new address

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**STEP 2: Membership Dues (FOR APPA MEMBERS ONLY)**

2017 Membership Dues (check one):

Members & Fellows- \$150

Life Members- \$50

Dues in Arrears- \$ \_\_\_\_\*

\*APPA depends on member dues to create exciting programs each year. If you think you might owe dues from previous years, please contact [appaasn@gmail.com](mailto:appaasn@gmail.com)

**TOTAL DUES 2: \$ \_\_\_\_\_**

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**STEP 3: Meeting Registration\* (please check registration option):**

\*Please note registration amounts below are the totals without the Hotel Discount (see step 4).

REGISTRATION	Members	Non-members	Students/Trainees † †
<i>Before 12/31/16 †</i>	\$345	\$625	\$230
<i>Jan. 1- Feb. 11</i>	\$405	\$735	\$280
<i>Feb. 12- Feb. 27</i>	\$455	\$835	\$330
<i>On site (after 2/27/17)</i>	\$555	\$935	\$430

† Payment must be received by 11:59 pm to get the early bird rate

† † Verification of student/trainee status must be attached to receive student/trainee rate (student ID with dates, note from registrar or program director, or school registration confirmation required)

**TOTAL REGISTRATION FEE 3: \$ \_\_\_\_\_**

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**STEP 4: Hotel Discount:** If you are staying at the Crowne Plaza Hotel for at least one night and are registering *on or before February 11th*, please subtract \$75 from your total registration amount.

**TOTAL HOTEL DISCOUNT 4: \$ - \_\_\_\_\_**

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**STEP 5: Unrestricted tax deductible donation:**

**TOTAL DONATION 5: \$ \_\_\_\_\_**

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**STEP 6: Payment Summary:**

Membership Dues Step 2: \$ \_\_\_\_\_  
Registration Fee Step 3: \$ \_\_\_\_\_  
Hotel Discount Step 4: \$ - \_\_\_\_\_  
Donation Step 5: \$ \_\_\_\_\_  
**TOTAL DUE:** \$ \_\_\_\_\_

**At the 2017 Meeting, I am:**

A speaker  
A poster presenter  
An attendee

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**STEP 7: Payment Information** (Please note: Cash is not accepted)

Online payment through PayPal ([www.paypal.com](http://www.paypal.com))

Check enclosed (in U.S. dollars)

Please make check payable to: **American Psychopathological Association**

Check # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Credit Card Type: Visa    Master Card    American Express  
Credit Card # \_\_\_\_\_ Security Code \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name (as it appears on card) \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**\*\*\*Financial Policies\*\*\***

Receipt will be provided *only* after check or credit card clears.

Prior to *February 1<sup>st</sup>*, a \$25 processing fee for cancellation will be assessed.

From *February 1-15<sup>th</sup>*, half of registration fee will be returned from cancellation.

*After February 15<sup>th</sup>*, NO refund can be processed.

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**STEP 8: Mailing Instructions:** Mail or scan form with payment to:

APPA, c/o Patrick Shrout, Treasurer  
39 Marion Road  
Montclair, NJ 07043  
[appaassn@gmail.com](mailto:appaassn@gmail.com)

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**STEP 9: Hotel Reservations** at \*\*\*\***Crowne Plaza Times Square**\*\*\*\*

1605 Broadway, 49<sup>th</sup> Street, New York, NY

(888) 233-9527

<https://resweb.passkey.com/go/APPA2017>

Please book with the Crowne Plaza Hotel, as APPA has reserved a bank of hotel rooms at a **significantly discounted rate** for 2017, and we are penalized if all the rooms are not used. To receive the reduced rate, reservations **MUST** be made by February 11<sup>th</sup>; give the **block name "APPA"** (or American Psychopathological Association) when you call. If you have any problems, please contact [appaassn@gmail.com](mailto:appaassn@gmail.com).

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**INTERESTED IN APPLYING FOR MEMBERSHIP?**

Visit our website, [www.appassn.org](http://www.appassn.org), for more information on becoming member!

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