

APPA Fall Conference and Practice Manager's Mini Conference

October 4-5, 2019

Grand Bohemian Hotel Mountain Brook



APPA 2019 Fall Conference Registration

PLEASE PRINT CLEARLY

Name _____

Name for Badge _____

Practice Name _____

Address _____

Office Phone _____

E-mail _____

Dietary Needs _____

Designation	<input type="checkbox"/> MD	<input type="checkbox"/> DO	<input type="checkbox"/> RN
	<input type="checkbox"/> Social Worker	<input type="checkbox"/> Psychologist	<input type="checkbox"/> Practice Manager
	<input type="checkbox"/> Other _____		

City, State ZIP _____

Cell Phone _____

Practice Manager Name _____

Practice Manager E-mail _____

First Time Attendee

REGISTRATION FEES: Check all that apply.

Welcome Reception Friday, October 4, 6-8 p.m., Art Gallery at the Grand Bohemian Hotel

- Free for all registered attendees
- Spouse and guests \$50. Number attending _____

APPA Fall Conference, Saturday, October 5 (Add \$100 if registering after Sept. 30)

ECP, RFM, and student registration is free!

- Member \$250
- Non-Member \$350
- Non-physician Clinician \$170
- Early Career Psychiatrist - Free
- Resident/Fellow - Free
- Student - Free
- Practice Manager of APPA Member \$125
- Practice Manager of APPA Non-member \$225

REGISTRATION

Register online at www.tinyurl.com/APPA2019FallConference or mail to APPA Fall Conference, Attn. Meghan Martin, PO Box 1900, Montgomery, AL 36102-1900. Fax (334) 269-5200. www.alabamapsych.com.

ACCOMMODATIONS: THE GRAND BOHEMIAN HOTEL MOUNTAIN BROOK

The APPA room block rate at the Grand Bohemian Hotel Mountain Brook is \$249 per night and is available for three days before and three days after the conference. Make your hotel reservations before Sept. 6 by calling (888) 711-5114. Ask for the Alabama Psychiatric Physicians Association group rate.

PAYMENT

Check payable to APPA Credit Card: VISA MasterCard American Express

Cardholder Name _____ Email address for receipt: _____

Card Number _____ Exp. Date _____ Security Code _____

Billing Address _____ City, State ZIP _____

Signature _____ Amount: \$ _____