

**REGISTRATION FORM**

*Fourth Adoption Conference: "Families Without Borders? Adoption Across Culture and Race"*

*Friday, October 13 - Saturday, October 14, 2006*

Please print:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**ATTENDEE TYPE:**

General  Student  Nassau County Psychological Association  St. John's University Alumni

**REGISTRATION FEES:**

I will be attending:  Friday  Saturday  Both Days

**Single Day** (Friday or Saturday)

**Before September 10, 2006**

General \$85  
Students (with ID) \$35  
Nassau County Psychological Association and St. John's Alumni  \$65

**After September 10, 2006**

General \$100  
Students (with ID) \$45  
Nassau County Psychological Association and St. John's Alumni \$85

**Both Days** (Friday and Saturday)

**Before September 10, 2006**

General \$150  
Students (with ID)  \$65  
Nassau County Psychological Association and St. John's Alumni \$120

**After September 10, 2006**

General \$170  
Students (with ID) \$100  
Nassau County Psychological Association and St. John's Alumni \$140

**Subtotal Registration Fee:** \$ \_\_\_\_\_

**CHOOSE WORKSHOPS/ PAPER SESSIONS TO ATTEND:**

#1 (Friday, October 13 at 10:45 a.m.) \_\_\_\_\_

#2 (Friday, October 13 at 3:15 p.m.) \_\_\_\_\_

#3 (Saturday, October 14 at 10:45 a.m.) \_\_\_\_\_

#4 (Saturday, October 14 at 3:15 p.m.) \_\_\_\_\_

**BOXED LUNCH:**

Friday: \$10

Circle one type of sandwich:

Roasted Turkey, Chicken Salad, Grilled Vegetables, or Roast Beef

Saturday: \$10

Circle one type of sandwich:

Roast Beef, Chicken Breast or Roasted Eggplant and Vegetables

**Subtotal for Lunches:** \$ \_\_\_\_\_

**DONATION:**

In addition to the registration fee I would like to make a tax-deductible donation of \$\_\_\_\_\_ to support St. John's University and the Adoption Symposium. The donation will be:  in my name  in the name of \_\_\_\_\_ . St. John's is a 501(c) (3) nonprofit organization. Your contribution is tax-deductible to the extent allowed by law. Upon receipt of the donation, you will be provided with a receipt with St. John's tax ID number.

**Subtotal Donation for Conference:** \$ \_\_\_\_\_

**PAYMENT FOR CONTINUING EDUCATION:**

A separate check is required for continuing education.  
A \$20 fee is required payable to **St. John's University**.

You will provided with a certificate after completion of the conference

I am enclosing a check for Continuing Education Credits.

I am not interested in Continuing Education Credits at this time.

**PAYMENT FOR CONFERENCE:**

We accept payment by check, money order or credit card. If paying by credit card please include information below. Please include a separate check for CE credits (see above).

**Amount Due and Payment**

Registration Fees: \_\_\_\_\_

Lunch Fees: \_\_\_\_\_

Tax Deductible Donation: \_\_\_\_\_

CE Credits Fee: \_\_\_\_\_

(Must be a separate check made payable to St. John's University)

Total Amount Due: \_\_\_\_\_

**Checks: Please make checks payable to St. John's University**

Credit Card Information: *Check One:*  AMEX  Visa  MasterCard

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Refunds prior to September 10, 2006 are subject to a \$15 administrative fee. No refunds granted after September 10, 2006.

For more information, registration and payments contact:

Rafael Art Javier, Ph.D., ABPP

Adoption Conference Registration  
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St. John's University  
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