Registration Form for PDP Online Courses

A separate registration form must be completed and submitted for each PDP participant. Please fax or mail your registration form to Sue McNamara (contact information is below).

Name:			
Agency:			
Address:			
City:	State/Province:	Postal Code:	
Country:			
Phone:	Fax:	Fax:	
E-mail:			
Certification Type :	Certification Num	Certification Number:	

Online Courses	Cost	
PDP 606: Rehab of Persons w/Psych Disability	\$300*	
Psychiatric Rehabilitation, 2nd edition	\$39.97	
Readings in Psychiatric Rehabilitation (on CD)	\$34.95	
Psych & Social Aspects of Psych Disability	\$22.47	
PDP 608: Psych & Social Aspects of Psych Disability	\$300*	
Psych & Social Aspects of Psych Disability	\$22.47	
Experience of Recovery	\$10.00	
Anguished Voices	\$10.00	
PDP 703-Rec: Facilitating a Recovery Workshop	\$225*	
Recovery Workbook	\$29.95	
Leader's Guide: The Recovery Workbook	\$4.95	
Experience of Recovery	\$10.00	
Self-Directed Psychiatric Rehabilitation Activities	\$50*	
Group Process Guidelines	\$100*	
Shipping for a free copy of <i>Group Process Guidelines</i> book	\$10 inside US \$30 outside US	

^{*(}no shipping cost, no sales tax)

Ethics in Psychiatric Rehabilitation	\$25*			
Research Issues for Mental Health Consumers/Survivors	\$50*			
How to Give a Workshop	\$25*			
How to Write a Journal Article	\$25*			
Subtotal cost for Courses				
Subtotal cost for required Books				
MA 6.25% sales tax (only for MA residents purchasing books)				
Shipping Costs for Books only (see chart below to determine shipping costs)				
TOTAL				

^{*(}no shipping cost, no sales tax)

Shipping and Handling

Order Subtotal	Within U.S.	Outside U.S.	
Under \$100	\$10	\$30	
\$100 - \$500	10% of subtotal	30% of subtotal	
Over \$500	7% of subtotal	30% of subtotal	

Payment Method

() Enclosed is a check or money order made payable to Boston University. (Payment must be in U.S. funds by U.S. bank draft or international money order.)						
Please charge my credit card:	VISA	MasterCard	Discover	Amer Express		
Credit Card Account Number:						
Expiration Date:						
Signature of Authorized Buyer:						

Send Order Form to:

Sue McNamara, MS, CRC, CPRP Boston University Center for Psychiatric Rehabilitation 940 Commonwealth Avenue West, 2nd floor Boston, MA 02215

Phone: 617-358-2574 FAX: 617-353-9209 suemac@bu.edu