

## 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:                  |              |
| E-mail:              |                       |              |
| Certification Type : | Certification Number: |              |

| Online Courses                                                     | Cost    |
|--------------------------------------------------------------------|---------|
| PDP 606: Rehab of Persons w/Psych Disability                       | \$300   |
| • <i>Psychiatric Rehabilitation, 2nd edition</i> (PDF file)        | \$39.97 |
| • <i>Readings in Psychiatric Rehabilitation</i> (PDF file)         | \$17.47 |
| • <i>Psych &amp; Social Aspects of Psych Disability</i> (PDF file) | \$22.47 |
| PDP 608: Psych & Social Aspects of Psych Disability                | \$300   |
| • <i>Psych &amp; Social Aspects of Psych Disability</i> (PDF file) | \$22.47 |
| • <i>Experience of Recovery</i> (PDF file)                         | \$5.00  |
| • <i>Anguished Voices</i> (PDF file)                               | \$5.00  |
| PDP 703-Rec: Facilitating a Recovery Workshop                      | \$225   |
| • <i>Recovery Workbook</i> (PDF file)                              | \$14.97 |
| • <i>Leader's Guide: The Recovery Workbook</i> (PDF file)          | \$2.47  |
| • <i>Experience of Recovery</i> (PDF file)                         | \$5.00  |
| Self-Directed Psychiatric Rehabilitation Activities                | \$50    |
| Group Process Guidelines                                           | \$100   |
| Ethics in Psychiatric Rehabilitation                               | \$25    |
| Research Issues for Mental Health Consumers/Survivors              | \$50    |

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|                                                                   |      |
|-------------------------------------------------------------------|------|
| How to Give a Workshop                                            | \$25 |
| How to Write a Journal Article                                    | \$25 |
| • Subtotal cost for Courses                                       |      |
| • Subtotal cost for required Books (PDF files)                    |      |
| • MA 6.25% sales tax ( <b>for MA residents purchasing books</b> ) |      |
| <b>TOTAL:</b>                                                     |      |

For more information: <https://cpr.bu.edu/store/courses>

### Payment Method

|                                                                                                                                                               |      |            |          |                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------------|----------|-----------------|
| ( ) Enclosed is a check or money order made payable to Boston University.<br>(Payment must be in U.S. funds by U.S. bank draft or international money order.) |      |            |          |                 |
| Please charge my credit card:                                                                                                                                 | VISA | MasterCard | Discover | AmericanExpress |
| 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, 2<sup>nd</sup> floor  
 Boston, MA 02215  
 Phone: 617-358-2574  
 FAX: 617-353-7700  
[suemacs@bu.edu](mailto:suemacs@bu.edu)