

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>	_____ \$39.97
• <i>Readings in Psychiatric Rehabilitation (on CD)</i>	_____ \$34.95
• <i>Psych & Social Aspects of Psych Disability</i>	_____ \$22.47
PDP 608: Psych & Social Aspects of Psych Disability	_____ \$300*
• <i>Psych & Social Aspects of Psych Disability</i>	_____ \$22.47
• <i>Experience of Recovery</i>	_____ \$10.00
• <i>Anguished Voices</i>	_____ \$10.00
PDP 703-Rec: Facilitating a Recovery Workshop	_____ \$225*
• <i>Recovery Workbook</i>	_____ \$29.95
• <i>Leader's Guide: The Recovery Workbook</i>	_____ \$4.95
• <i>Experience of Recovery</i>	_____ \$10.00
Self-Directed Psychiatric Rehabilitation Activities	_____ \$50*
Group Process Guidelines	_____ \$100*

*(no shipping cost, no sales tax)

Continued on next page

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
for the Subtotal Cost of Books Only**

The cost of shipping/handling is based on the UPS rates to ship your package from Boston, MA, to your location, and will be calculated after your order form is received.

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:

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