

# Registration Form

## Journey Together Conference | September 5–8, 2007

Please place a check in the box next to the workshops you wish to attend.  
Seating preference will be given to those who have pre-registered.

Please select one workshop per session.

Please check the fees/membership categories below.

### Wed., Sept. 5

- | DOT/SAP Qual./Re-Qual.; 9am–5pm  
 | LGBT Cultural Competency; 9am–5pm

### Wed., Sept. 5 | SESSION A

- A1 | Alcohol & Adolescents  
A2 | TIP #42  
A3 | Geriatric Substance Use  
A4 | Dreams & Addictions  
A5 | Clinical Applications of Ethics  
A6 | Working with Faith Community

### Wed., Sept. 5 | SESSION B

- B1 | Treating Adolescents  
B2 | Bridging the Gap  
B3 | Fetal Alcohol Syndrome (FAS)  
B4 | Clinical Art Psychotherapy  
B5 | Breathe, Stretch and Relax  
B6 | The Lost Voices of Addicted Women

### Thurs., Sept. 6

- | DOT/SAP Qual./Re-Qual.; 9am–5pm

### Thurs., Sept. 6 | SESSION C

- C1 | Children with Bipolar Disorder  
C2 | Working with GLBT Clients  
C3 | Team Approach/Technology  
C4 | Update on Drug Testing  
C5 | Stages of Change  
C6 | Nuts and Bolts

### Thurs., Sept. 6 | SESSION D

- D1 | Functional Addicts: Their Impact  
D2 | Lesbians, Spirituality and A.A.  
D3 | Chasing the Tail of the Dragon  
D4 | Animal Assisted Therapy  
D5 | Drug Involved Offenders  
D6 | Help Wanted

### Fri., Sept. 7 | SESSION E

- E1 | Drugs & Gangs  
E2 | Prescription Medication Misuse  
E3 | Changing Financial Templates  
E4 | Crystal Meth in MSM Community  
E5 | Treating Codependence  
E6 | Males with a History of Trauma

### Fri., Sept. 7 | SESSION F

- F1 | HIV and AIDS  
F2 | Managing Pain & Addictive Disorders  
F3 | Clinical Evaluation/Treatment Plans  
F4 | Addressing Clients Sexual History  
F5 | STEMSS®  
F6 | The Chronically Homeless

### TRACK CODES

- Adolescents Track  
 Special Populations Track  
 Treatment Skills/Issues Track  
 Workforce Development Track  
 NALGAP Track

Schedule subject to change.

### CONFERENCE REGISTRATION FEES

#### Early-Early Bird (register by May 16, 2007)

- Member: \$300,  Non-Member: \$375  
 Student/Military Member: \$200  
 Student/Military Non-Member: \$250

#### Early Bird (register by July 6, 2007)

- Member: \$325,  Non-Member: \$400  
 Student/Military Member: \$200  
 Student/Military Non-Member: \$250

#### Regular Fees (register after July 6, 2007)

- Member: \$375,  Non-Member: \$425  
 Student/Military Member: \$200  
 Student/Military Non-Member: \$250

### Daily Rate

- Member: \$100,  Non-Member: \$125  
 Student/Military Member: \$75  
 Student/Military Non-member \$100

### Guest Dinner Tickets (for Sept. 8)

- Member: \$50;  Non-Member: \$75

### MEMBERSHIP CATEGORIES

- TAAADAC/NAADAC Member  
 NAADAC Member  
 NALGAP Member  
 NAADAC Organizational Member  
 Conference Sponsor/Exhibitor

Member # \_\_\_\_\_ (if applicable)

### ATTENDEE INFORMATION (Please print clearly)

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

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

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

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

### FEE CALCULATION

- \_\_\_\_\_ Conference Fee  
\_\_\_\_\_ Guest Dinner Ticket (*Dinner is included for conference participants*)  
\_\_\_\_\_ YES, I want to join the NAADAC and the Tennessee Association now! Please add \$105 (Professional member); \$84 (Full Associate member); \$68 (Partial Associate member); \$42.50 (Student member) to your total. Please consult NAADAC Membership at [www.naadac.org](http://www.naadac.org) for dues rate to join a state other than Tennessee.  
 Please send me additional information about membership.  
\_\_\_\_\_ Ticket for the NAADAC Political Action Committee (PAC) reception on Sept. 7. \$35 suggested donation. Corporate checks or credit cards cannot be used to pay for PAC tickets.  
\_\_\_\_\_ DOT/SAP Qualification/Re-Qualification Course—Member: \$285; Non-Member: \$350.  
\_\_\_\_\_ **Total Amount Enclosed**

### PAYMENT INFORMATION

- Check or money order payable to NAADAC  
 Charge my:  Visa  Mastercard  American Express

Name as appears on credit card (please print clearly) \_\_\_\_\_

Credit card number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

### RETURN COMPLETED FORM TO NAADAC VIA:

#### MAIL

Journey Together Conference 2007  
901 N. Washington Street, Suite 600  
Alexandria, VA 22314

#### FAX

703.741.7698 or 1.800.377.1136

#### EMAIL

[naadac@naadac.org](mailto:naadac@naadac.org)

**Annual Conference Refund Policy:** Upon written request up to 30 days before the conference, a refund of 75% of registration fee will be given. After 30 days, 50% of conference fees are refundable.

For more information, please visit [www.naadac.org](http://www.naadac.org), call 800.548.0497 or email [naadac@naadac.org](mailto:naadac@naadac.org) (please put "Annual Conference" in the subject line).