

**NOW!**  
**Register Online**  
**LAGPA.org**

**Registration Form**  
**24<sup>th</sup> Annual LGBTQI Psychotherapy Conference**  
**Sunday, November 17, 2019**

**NOW!**  
**Register Online**  
**LAGPA.org**

**Mount Saint Mary's University—Doheny Campus, 10 Chester Place, LA, CA 90007**  
**REGISTRATION DEADLINE: This form and payment must be returned by November 11, 2019.**

Maps and parking information provided upon registration.

Name ( <i>print</i> ):		
Degree / License:		
Address:		
City:	State:	Zip:
Phone:		
Email*:		
License or Intern Registration number:		

\*Registration will be confirmed via email. Please print your email clearly.

The cost of CE, breakfast, lunch, and parking for each attended workshop is included in the registration fee.

**CONFERENCE PRE-REGISTRATION**

Check Your Category

**Member (already a member?)**

<input type="checkbox"/>	Current LAGPA Regular/Associate Member	\$ 155
<input type="checkbox"/>	Current LAGPA Student/Intern/Retiree Member	\$ 100

**If you are not a current member, simply visit our website at [www.LAGPA.org](http://www.LAGPA.org) and register as a member. Being a member gives you significant discount.**

**Non-Member**

<input type="checkbox"/>	Non-Member/Non-Associate Member	\$ 185
<input type="checkbox"/>	Non-Member Student/Intern/Retiree	\$ 130

**WORKSHOP SELECTION**

For each concurrent session, please identify your first and second choice for each session by writing the workshop number in the spaces below. This information is for conference planning only—you may attend whichever workshops you would like on the day of the conference.

Session 1	Session 2	Session 3
1A, 1B, 1C, 1D	2A, 2B, 2C, 2D	3A, 3B, 3C, 3D
1 <sup>st</sup> Choice:	1 <sup>st</sup> Choice:	1 <sup>st</sup> Choice:
2 <sup>nd</sup> Choice:	2 <sup>nd</sup> Choice:	2 <sup>nd</sup> Choice:

If you are a presenter or volunteer, please check this box.

**METHOD OF PAYMENT**

A check in the amount of \$ \_\_\_\_\_ made payable to LAGPA

OR

Charge my:  VISA  Master Card  American Express (Check appropriate box)

Name of Cardholder (as it appears on card)

Please Print: \_\_\_\_\_

Credit Card Number (print clearly):

\_\_\_\_\_

Exp. Date \_\_\_\_/\_\_\_\_ Security Code: \_\_\_\_\_ Zip: \_\_\_\_\_

Note: Security Code is found on the front of American Express Cards and on the back of all other credit cards.

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

Total Amount To Be Charged \$ \_\_\_\_\_

**REGISTERING THE DAY OF THE CONFERENCE**

**Yes, you may register at the door. You save considerable money, however, by pre-registering.**

**Member (already a member?)**

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<input type="checkbox"/>	Current LAGPA Student/Intern/Retiree Member	\$ 130

**Non-Member**

<input type="checkbox"/>	Non-Member/Non-Associate Member	\$ 215
<input type="checkbox"/>	Non-Member Student/Intern/Retiree	\$ 155

MAIL COMPLETED REGISTRATION FORMS WITH PAYMENT TO:  
**LAGPA Conference Registration**  
**PO Box 34142, Los Angeles, CA 90034**  
 OR, FAX To: 310-838-6247  
 OR, Scan and email to: LAGPA@sbcglobal.net  
 OR, **register online at [www.LAGPA.org](http://www.LAGPA.org)**

Note: All Students must be unlicensed and must include documentation of full-time student status. Please enclose a copy of your current student ID with your registration form