

# 2017 Annual AMTA Conference Registration

A Mindful Approach to Music Therapy  
St. Louis Union Station Hotel • November 13–19, 2017

## Step 1 - Your Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ First name or nickname as you would like it to appear on your badge \_\_\_\_\_ Credentials \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Special Needs  Check here if a disability requires accommodation for you to fully participate.

## Step 2 - Conference Registration

**AMTA 2017 Membership** — (NOTE: Only current 2017 AMTA members are eligible for discounts. If you are a member next year in 2018, you may enjoy the conference discount at the 2018 conference. If not a current member, you may purchase 2017 membership and register at the same time.)

- 2017 Professional Membership..... \$250  
 2017 Student Membership..... \$95

**Total Membership \$** \_\_\_\_\_

**Conference Registration Type** — (please check one)

	<b>Early</b>	<b>Regular</b>	<b>Late</b>
	Postmarked by 8/4/17	Postmarked by 10/11/17	Postmarked after 10/11/17
Conference Registration Cost.....	<input type="checkbox"/> \$645.....	<input type="checkbox"/> \$745.....	<input type="checkbox"/> \$845
AMTA Member Discounted Cost.....	<input type="checkbox"/> \$370.....	<input type="checkbox"/> \$470.....	<input type="checkbox"/> \$570
Full-time Student Registration Disc.....	<input type="checkbox"/> \$355.....	<input type="checkbox"/> \$355.....	<input type="checkbox"/> \$390
AMTA Student Member Disc. Cost.....	<input type="checkbox"/> \$235.....	<input type="checkbox"/> \$235.....	<input type="checkbox"/> \$270
One Day (which day? _____).....	<input type="checkbox"/> \$570.....	<input type="checkbox"/> \$570.....	<input type="checkbox"/> \$570

Must be postmarked by date indicated - without exception - for discounted rates.

**Total Registration \$** \_\_\_\_\_

## Step 3 - Additional Courses (check schedule carefully for conflicts)

	Cost \$	Member discounted \$
<input type="checkbox"/> Bonny Method GIM I.....	\$850	\$650
<input type="checkbox"/> Social Communication in ASD....	\$260	*FREE
<input type="checkbox"/> NICU Training.....	\$435	\$200
<input type="checkbox"/> When Children Hurt.....	\$25	\$25
<input type="checkbox"/> Drums Alive® Training.....	\$315	\$255
<input type="checkbox"/> Mindfulness Music & Imagery....	\$435	\$235
<input type="checkbox"/> Leadership Academy.....	\$320	\$80
<input type="checkbox"/> Optimal Rhythms.....	\$330	\$130
<input type="checkbox"/> Creative Dementia Care.....	\$260	\$60
<input type="checkbox"/> Ther. Uses of the Harp.....	\$260	*FREE
<input type="checkbox"/> Developing Reflective Practice...	\$260	*FREE
<input type="checkbox"/> Ethical Considerations.....	\$260	*FREE
<input type="checkbox"/> First Sounds.....	\$435	\$235
<input type="checkbox"/> Neuroscience Tech.....	\$300	\$25

**Total pre-conference courses \$** \_\_\_\_\_

**5-credit CMTE courses:** \$300; member discounted price, \$100

(\*starred courses: FREE registration with a \$10 processing fee for current AMTA members registered for the conference - i.e., member discounted price = \$10 each)

- A  B  C  D  E  F  G  H  I  N  
 O  P  Q\*  R  S  T  Z\*

**Total 5 credit CMTEs \$** \_\_\_\_\_

**3-credit CMTE courses:** \$260; member discounted price, \$60

(\*starred courses: FREE registration with a \$10 processing fee for current AMTA members registered for the conference - i.e., member discounted price = \$10 each)

- J  K  L  M  U\*  V\*  W\*  X\*  
 Y\*  AA\*

**Total 3 credit CMTEs \$** \_\_\_\_\_

## Step 4 - Total

Total Membership..... \$ \_\_\_\_\_  
Total Registration..... \$ \_\_\_\_\_  
Total pre-conference courses..... \$ \_\_\_\_\_  
Total 5 credit CMTE courses..... \$ \_\_\_\_\_  
Total 3 credit CMTE courses..... \$ \_\_\_\_\_  
Optional AMTA Donation (suggested \$50)..... \$ \_\_\_\_\_

**GRAND TOTAL \$** \_\_\_\_\_

## Step 5 - Payment

**Paying by** — (please check one)

- Visa  MasterCard  Discover  Check  Money Order

I agree to pay the above amount:

Card number: \_\_\_\_\_

Exp. date: \_\_\_\_\_

Signature (required): \_\_\_\_\_

After Nov. 1, please register online or on-site.

## Step 6 - Sign and Mail or Fax

**Waiver** — (please read and sign)

I agree and acknowledge that I am undertaking such participation in these conference events and activities as my own free and intentional act and I am fully aware that possible physical injury might occur as a result of my participation in these events. I do hereby assume responsibility for my own well-being. I agree not to allow any other individual to participate in my place. I have reviewed and agree to the refund policy as well as other policies available on the conference page at [www.musictherapy.org](http://www.musictherapy.org).

Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

Please make payment payable in US Funds drawn on a US Bank. Payment must be made in full and mailed with this registration form to:

AMTA, 8455 Colesville Rd., Ste. 1000  
Silver Spring, MD, USA 20910  
Fax (301) 589-5175 — [www.musictherapy.org](http://www.musictherapy.org)