

MACMH SUMMER TRAINING SERIES

Infants • Children • Adolescents

Registration Form

651-644-7333 • info@macmh.org • fax 651-644-7391 • MACMH, 165 Western Avenue N, Suite 2, St. Paul, MN 55102

ADHD: Misdiagnosed; Misunderstood; and Mistreated			Hard to Handle Children with Mental Health Disorders		
Session 1 Wednesday June 3, 2009 12:30-3:30 p.m. French Park Visitor Ctr	Session 2 Thursday July 9, 2009 12:30-3:30 p.m. Rogers Comm. Room	Session 3 Thursday August 13, 2009 12:30-3:30 p.m. Wellstone Center	Session 4 June 4, 2009 No Longer Available	Session 5 Wednesday July 8, 2009 12:30-3:30 p.m. Wellstone Center	Session 6 Wednesday August 12, 2009 12:30-3:30 p.m. Eagan Community Ctr

Adolescents with Chemical Dependency & Mental Illness: Addressing Complexities of Dual Diagnosis			Observation: A Core Competency for Infant & Early Childhood Mental Health Professionals		
Session 7 Thursday June 11, 2009 12:30-3:30 p.m. Dodge Nature Center	Session 8 Thursday July 30, 2009 12:30-3:30 p.m. Kroening Interpretive Ctr	Session 9 Thursday August 20, 2009 12:30-3:30 p.m. Coppertop Church	Session 10 Tuesday June 16, 2009 Foundations and Principles 8:30-11:30 p.m. Wilder Center	Session 11 Tuesday June 16, 2009 Application and Intervention 12:30-3:30 p.m. Wilder Center	

Crying, Feeding, & Sleep: Infant-Parent Work to Support Regulatory Success		All About Minds: Infants, Parents & Service Providers; Considering Multiple Perspectives in Early Intervention	
Session 12 Thursday June 25, 2009 Foundations and Principles 8:30-11:30 p.m. Richardson Nature Center	Session 13 Thursday June 25, 2009 Application and Intervention 12:30-3:30 p.m. Richardson Nature Center	Session 14 Monday July 13, 2009 Foundations and Principles 8:30-11:30 p.m. Maple Grove Community Center	Session 15 Monday July 13, 2009 Application and Intervention 12:30-3:30 p.m. Maple Grove Community Center

Name _____

Agency _____

Job Title _____

Home Work Address _____

_____ City _____

State _____ Zip _____ County _____

Phone H W C _____

E-mail _____

I work in:

Corrections Social Services

Early Childhood Public Health

Education Other _____

Health Care _____

Mental Health _____

Mark your session number
Each session is \$74

<input type="radio"/> 1 \$ _____	<input type="radio"/> I would like to order <i>An Educator's Guide to Children's Mental Health</i>
<input type="radio"/> 2 \$ _____	at 25% off* \$18.71
<input type="radio"/> 3 \$ _____	
<input type="radio"/> 5 \$ _____	<input type="radio"/> I would like to order <i>A Guide to Early Childhood Mental Health</i>
<input type="radio"/> 6 \$ _____	at 25% off* \$20.96
<input type="radio"/> 7 \$ _____	
<input type="radio"/> 8 \$ _____	Subtotal Publications \$ _____
<input type="radio"/> 9 \$ _____	
<input type="radio"/> 10 \$ _____	Subtotal Sessions Cost \$ _____
<input type="radio"/> 11 \$ _____	
<input type="radio"/> 12 \$ _____	
<input type="radio"/> 13 \$ _____	
<input type="radio"/> 14 \$ _____	Total Due \$ _____
<input type="radio"/> 15 \$ _____	

Sessions \$ _____

Please indicate your form of payment:

Check or money order payable to MACMH

Purchase Order (please include PO with registration)

Visa Discover Master Card

*Registrants qualify for a 25% discount off the list price of *An Educator's Guide to Children's Mental Health* (regularly \$24.95) and *A Guide to Early Childhood Mental Health* (regularly \$27.95). More information about these publications is available at www.macmh.org. Your publication(s) will be available for pick-up at your first session check-in.

Call MACMH at 651-644-7333 for more information on a discount for groups of 3 or more or for individuals registering for 3 or more sessions.

Credit Card Information (if different from Registration Information)

Name as it appears on card _____	Credit Card # _____
Street _____	3-Digit Code _____ Exp. date _____ Amount \$ _____
City _____ State _____ Zip _____	Signature _____