



## 2025 CONFERENCE - REGISTRATION FORM

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone Daytime \_\_\_\_\_ Evening \_\_\_\_\_

Cell \_\_\_\_\_

Email \_\_\_\_\_

Credential (degree): \_\_\_\_\_

Licensure: License type, State, License number (one per line)

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### Paper, Panel, and Workshop Selection

List 1st, 2nd, and 3rd choices for each time slot by writing the number as it appears in the schedule:

Friday, 10:15 am	(nos. 2-7)	____ 1 <sup>st</sup>	____ 2 <sup>nd</sup>	____ 3 <sup>rd</sup>
Friday, 1:15 pm	(nos. 8-13)	____ 1 <sup>st</sup>	____ 2 <sup>nd</sup>	____ 3 <sup>rd</sup>
Saturday, 10:15 am	(nos. 16-21)	____ 1 <sup>st</sup>	____ 2 <sup>nd</sup>	____ 3 <sup>rd</sup>
Saturday, 3:35 pm	(nos. 23-28)	____ 1 <sup>st</sup>	____ 2 <sup>nd</sup>	____ 3 <sup>rd</sup>
Sunday, 8:45 am	(nos. 29-31)	____ 1 <sup>st</sup>	____ 2 <sup>nd</sup>	____ 3 <sup>rd</sup>

### Check if attending:

\_\_\_\_ Thursday, 4:00 pm, Walking Tour of Austin (Ticket sponsored by AAPCSW)

\_\_\_\_ Friday, 6:05 pm, Reception at Omni Austin Hotel (included in conference fee)

\_\_\_\_ Saturday, 12:15 pm, Luncheon at Omni Austin Hotel (included in conference fee)

### Conference Registration Categories

	Early by 9.30.25	Standard by 10.31.25	On-site after 10.31.25
AAPCSW member	____ \$400	____ \$450	____ \$500
Non-Member	____ \$450	____ \$500	____ \$550
Student – Master's*	____ \$130	____ \$150	____ \$170
Student - PhD*	____ \$320	____ \$370	____ \$420
Candidate, Institute*	____ \$320	____ \$370	____ \$420
New Professional*	____ \$220	____ \$270	____ \$320

0-3 years post masters,  
year of graduation

\* With **Verification** from university or institute.

- (1) Conference registration fee includes: Thursday walking tour, Friday post-movie reception, Saturday luncheon, CE certificates.
- (2) Volunteering and scholarships are available for master's students and new professionals. To learn more, contact Penny Rosen at: [rosenpmsw@aol.com](mailto:rosenpmsw@aol.com)
- (3) Become a member, which includes the benefit of reduced conference fees: <https://aapcsw.org/membership/>

\*\* List dietary restrictions/food allergies: \_\_\_\_\_

### Payment Summary

Conference Registration Fee (see above)		\$
Thursday Walking Tour (sponsored by AAPCSW)	_____ Number of tickets	Sponsored
Donation to Student Conference Fund ***		\$
	<b>TOTAL</b>	\$

\*\*\* For details visit: [https://www.aapcsw.org/about\\_us/donate.html](https://www.aapcsw.org/about_us/donate.html)

(Thursday, 6:00-8:00 pm Meet Up at the Rainey Street District for Food and Drinks, after Walking Tour.)

**Payment Type** (check one):

\_\_\_ Check Please make payable to **NIPER**  
(National Institute for Psychoanalytic Education and Research in Clinical Social Work, Inc.,  
educational arm of AAPCSW)

\_\_\_ Visa \_\_\_ Mastercard \_\_\_ American Express

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ 3- or 4-Digit Security Code \_\_\_\_\_

Name (as on card) \_\_\_\_\_

Billing Address \_\_\_\_\_

**Mail enclosed check with this form to:**

NIPER c/o Lawrence Schwartz  
47-46 40th Street (#3E)  
Sunnyside, NY 11104

NOTE: Credit card payments can be mailed to the above address, phoned or faxed to (718) 728-7416

**Questions?**

Call (718) 728-7416

Email: [aapcsw@gmail.com](mailto:aapcsw@gmail.com)

**Cancellation policy:** Refunds (less \$50 administrative fee) will be granted only upon written request postmarked on or before 10.31.25

**Online registration:** <https://aapcsw.org/events/conference/>

*Conference is sponsored by the National Institute for Psychoanalytic Education and Research in Clinical Social Work, Inc. (NIPER), 501c3 educational arm of AAPCSW.*

*Note: Houston Psychoanalytic Society is approved by the American Psychological Association to sponsor continuing education for psychologists. Houston Psychoanalytic Society maintains responsibility for this program and its content.*

*Cosponsored by Institute for Clinical Social Work (ICSW-Chicago), and Psychoanalytic Psychotherapy Study Center (PPSC).*