Join us in celebrating Peer Support in New York State!

Celebration of Peer Support  
**Thursday, October 26, 2017**
Registration includes food, beverages, entertainment, giveaways and much more!
Celebration Registration is $69.00  
Early Bird Rate until 10/5/17 is $49.00

Inaugural Conference  
**Friday, October 27, 2017**
Registration includes conference workshops, snacks, beverages, giveaways and much more!
Lunch, hotel rooms and transportation are not included but limited scholarships are available.
Conference Registration is $139.00  
Early Bird Rate until 10/5/17 is $119.00

Celebration of Peer Support & Inaugural Conference
Full Registration is $189.00  
Early Bird Rate until 10/5/17 is $149.00

**Early Bird Discount is available until October 5, 2017**
Group Discounts available for 10 or more registrations
Visit www.nypscb.org for more info and to complete online registration

The New York Peer Specialist Certification Board is funded by the New York State Office of Mental Health

Conference Partner
Discounts available for Group Registrations

If you would like to register more than 10 people, the NYPSCB can work with you to simplify the registration process and offer you a group discount.

Groups of 10 or more: 10 % off Groups of 20 or more: 20 % off

To qualify for group discounts, your payment (check only) and registration list must be received by October 15th, 2017.

I am interested in registering for:

Celebration
- Early Bird Registration - $49.00 (Check Received by NYPSCB before October 6, 2017)
- Registration - $69.00 (Payments Received by NYPSCB after October 7, 2017)

Conference
- Early Bird Registration - $119.00 (Check Received by NYPSCB before October 6, 2017)
- Registration - $139.00 (Payments Received by NYPSCB after October 7, 2017)

Celebration & Conference
- Early Bird Registration - $149.00 (Check Received by NYPSCB before October 6, 2017)
- Registration - $189.00 (Payments Received by NYPSCB after October 7, 2017)

REGISTRATION INFORMATION:

Name ________________________________________________________________

Are you NYPSCB Certified?  □ YES  □ NO  If so, what is your certification number: __________

Email ________________________________________________________________

Phone ________________________________________________________________

Are you currently employed as a peer provider? If so, please provide the following info:

Agency Name __________________________________________________________

Title __________________________________________________ How Long? __________

Agency Address __________________________________________________________

City ___________________________ State __________ Zip __________

PAYMENT INFORMATION

Please make sure your check made payable to NYPSCB is enclosed. If you need an invoice or your agency is paying your registration fee, please complete online registration at www.nypscb.org

A $30 processing fee will be charged for all returned checks.

To pay by credit card, please contact the NYPSCB office. Thank you!!

All checks should be mailed to: NYPSCB, 11 North Pearl Street, Suite 801, Albany, New York 12207

Fax the completed application to (518) 426-1046

For More Information, contact: Tara Davis