



Psychiatric-Mental Health Nurses Joining Together for Critical Need:
Addressing Diversity, Those Affected by War, Violence, and Health Inequities Across Populations

REGISTRATION FORM

25th ISPN Annual Conference

Instructions:

Please complete all items on this registration form. Type or print legibly.
Keep one copy of this completed form for your records. **Save money by registering prior to February 28, 2023!**

All fees are quoted in U.S. funds.

Registration and Badge Information (Please Type or Print Clearly):

This is how your badge will read. Registration by phone will not be accepted.

First Name: _____

Last Name: _____

Credentials: _____

Place of Employment: _____

City: _____

State/Province: _____

Country: _____

Attendee Contact Information:

Daytime Telephone Number: _____

Email Address: _____

(Please provide an email address to receive confirmation of registration.
Please print clearly!)

Membership Information:

- ☐ Current member of ISPN
☐ Non-member
☐ Joining ISPN while registering for the Conference (must complete membership application).
* Membership will be active now through June 30, 2024. (July 1-June 30 membership year).

* Option to join ISPN while registering for the Annual Conference is only available to those individuals who have never belonged to ISPN. Past members who would like to renew and take advantage of the member discount for registration can renew online at ispn-psych.org, or contact the ISPN membership department at info@ispn-psych.org or +1-608-443-2463.

Membership Renewal:

July 1, 2023 to June 30, 2024. All fees are quoted in U.S. dollars.
☐ Full: \$150 ☐ Student: \$35 ☐ Retired: \$60

Nursing Contact Hours:

☐ Yes, I would like to receive nursing contact hours

State Licensed In: _____

License Number (required): _____

☐ No, I do not wish to receive nursing contact hours

Dietary Restrictions:

Are you vegetarian? ☐ Yes ☐ No

Other: _____

ISPN Foundation Event:

Thursday, March 30, 2023 - 6:30 p.m. to 8:30 p.m.

The theme for this year's ISPN Foundation Event will be 'Decades Gone Past'. Let us celebrate the 25th year for the ISPN Annual Conference by dressing in our favorite outfits from decades past. The Foundation Event will be a great time to meet the keynote speakers in a casual environment along with supporting the ISPN Historical Archiving initiative. Catch up with old colleagues and meet new colleagues at the ISPN Foundation Event. This event is open to everyone.

A silent and live auction will take place to raise funds to support scholarships to assist graduate students and international members, research grants, endowment for the Foundation, and ISPN sponsored events. Tickets are \$100 per person, students will receive a \$50 discount.

Number of Standard Tickets _____ X \$100 each = \$ _____

Number of Student Tickets _____ X \$50 each = \$ _____

The event is being sponsored by the University of Iowa College of Nursing.

IOWA

**College of
Nursing**

ISPN Pre-Meeting Workshop:

Complex PTSD and EMDR Therapy

Wednesday, March 29, 2023 - 1:00 p.m.-5:00 p.m.

	On or Before 2/28/2023	After 2/28/2023
<input type="checkbox"/> Member	\$190 USD	\$240 USD
<input type="checkbox"/> Non-member	\$225 USD	\$275 USD
<input type="checkbox"/> Student	\$140 USD	\$190 USD

+Include a copy of your student ID as proof of your student status.

ISPN Annual Conference:

Thursday, March 30 - Saturday, April 1, 2023

	On or Before 2/28/2023	After 2/28/2023
<input type="checkbox"/> Member	\$545 USD	\$595 USD
<input type="checkbox"/> Non-member	\$695 USD	\$745 USD
<input type="checkbox"/> Joining ISPN with the Conference	\$670 USD	\$720 USD
<input type="checkbox"/> Student+	\$250 USD	\$300 USD

+Include a copy of your student ID as proof of your student status.

One-Day Registration at Annual Conference

	On or Before 2/28/2023	After 2/28/2023
<input type="checkbox"/> Member	\$350 USD	\$400 USD
<input type="checkbox"/> Non-member	\$400 USD	\$450 USD
<input type="checkbox"/> Student+	\$100 USD	\$125 USD

+Include a copy of your student ID as proof of your student status.

Please check the date of attendance:

☐ Thursday ☐ Friday ☐ Saturday

Registration Discounts:

One discount is allowed per registrant. Please check the box that may be applicable to your registration fee:

☐ Annual Conference Lead Presenter

Concurrent Session/Workshop (\$50 credit)

(must register for the entire Annual Conference to receive the discount)

☐ Annual Conference Lead Poster Presenter (\$25 credit)

(must register for the entire Annual Conference to receive the discount)

General Information:

Email confirmation will be sent upon registering. If you do not receive confirmation, please contact the ISPN office at info@ispn-psych.org or +1-608-443-2463, ext. 144, to verify that your registration form has been received.

Online Attendee Directory: All attendees and exhibitors will have access to this directory which will include your name, credentials, city, state, country, and email address.

☐ Yes, I agree to be listed in the Online Attendee Directory.

☐ No, I do not agree to be listed in the Online Attendee Directory.

Photo Release: ISPN captures photographs and video during the meeting for future marketing purposes in print and electronically. Please indicate your consent below:

☐ Yes, I provide consent to ISPN to use my photo for marketing purposes in print and electronically.

☐ No, I do not provide consent to ISPN to use my photo for marketing purposes in print and electronically.

Special Assistance:

☐ Please check here if you need special assistance (an ISPN staff member will contact you for more details).

Fees:

Please total your fees from the different categories included on this registration form. ISPN's Federal Tax ID#: 36-2905672.

Membership Renewal:	\$ _____
Annual Conference Registration:	\$ _____
Pre-Meeting Workshop:	\$ _____
Foundation Event:	\$ _____
Foundation Donation:	\$ _____
Sub-total:	\$ _____

One Presenter Discount (if applicable): \$ _____

Grand Total: \$ _____

(Please include this amount with your registration form)

Cancellation:

Any Annual Conference registration cancellation must be made in writing directly to the ISPN. If received on or before March 1, 2023, ISPN will apply a \$100 administrative fee and refund the remainder after the meeting. After March 1, 2023, no refund will be given.

Payment:

Payment must accompany each registration form. International registrants must submit payment in U.S. dollars, drawn on a U.S. bank. Registration forms not including the proper registration fee will be returned immediately. Please do not send cash.

☐ Check (made payable in U.S. funds to ISPN)

☐ American Express/Discover/MasterCard/Visa

Card Number: _____

Expiration Date: _____

CVV: _____ Billing Zip Code: _____

Card Holder Name (please print clearly): _____

Card Holder Signature: _____

Mail or email this registration form with payment (no purchase orders, please) to the ISPN main office, as noted on page one of this form. Or, register online at: ispn-psych.org (under Conference).

ISPN Contact Information:

ISPN

2424 American Lane
Madison, WI 53704 USA

For more information, call or email:

Telephone: +1-608-443-2463

Email: info@ispn-psych.org

Website: ispn-psych.org