

Registration Make check payable to: Medical College of Wisconsin

Mail to: MCW-Dept of Psychiatry and Behavioral Medicine

Attn: The Door County Summer Institute 2008

8701 Watertown Plank Road Milwaukee, WI 53226

Name: _____ Degree: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email Address _____

Enclosed please find my check for \$ _____ (U.S. Funds)

FAX with credit card information to (414) 955-6299

Credit Card Number: _____ Exp.Date: _____

Charge: \$ _____ to _____ MasterCard _____ Visa

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July 21-25, 2008

- _____ Session I Brief Therapy: Some Stories Are Better Than Others, Michael Hoyt, PhD
- _____ Session II Managing Change: Critical Organizational Survival Skills, Mark Mone, PhD
- _____ Session III Mindfulness Practice in Mental Health: Helping the Clinician Help the Client, Paul Norton, MD

July 28-August 1, 2008

- _____ Session IV Innovations in Substance Abuse, Tom Kosten, MD, Therese Kosten, PhD
- _____ Session V Autism to Asperger's, Peter Tanguay, MD
- _____ Session VI Why Did the Cognition Cross the Road?, Fred Heide, PhD, and Lee Becker

August 4-8, 2008

- _____ Session VII Cognitive Behavioral Therapy, Donald Meichenbaum, PhD
- _____ Session VIII Pharmacotherapy of Mood and Anxiety Disorders, James Jefferson, MD, David Katzelnick, MD, John Greist, MD
- _____ Session IX Women's Mental Health, Laura Miller, MD

Before May 15, 2008

After May 15, 2008

First session

_____ \$535.00

_____ \$585.00

Additional Session

_____ \$485.00

_____ \$535.00

Full time students/residents

_____ \$460.00

_____ \$510.00

Group Rate (Minimum 3 registrations)

_____ \$500.00 (per person)

_____ \$550.00 (per person)

(Group registration fees must be received at the same time to qualify for rate)

Please indicate the type of credit you wish to receive:

_____ CME _____ APA Other: (Please List) _____