



APPLICATION FOR CPT TRAINING

**Cognitive Processing Therapy (CPT):
A Two-day Training for Treating PTSD (Webcast live to Rochester)**

**Led by Patricia A. Resick, Ph.D
Institute for Disaster Mental Health at SUNY New Paltz
Sponsored by the New York State Office of Mental Health**

Location of Webcast:
**American Red Cross
Greater Rochester Chapter
50 Prince Street
Rochester NY 14607**

**March 25
8:30am-6:00pm**

**March 26
8:00am-5:00pm**

Application Deadline: Wednesday March 17, 2010

Name of Applicant: _____
Last First Middle

Address _____ Office Phone _____

_____ Cell Phone _____

Email _____ Home Phone _____

Occupation/Title _____

Mental Health Professional License #, Date of Expiration & Discipline _____

Payment Information:

Course Fee \$175 per applicant (fee includes continental breakfast and lunch each day)

No refunds will be issued after the March 17th registration deadline

Check Attached (Payable to the American Red Cross)

Credit Card Visa MasterCard American Express Name on Credit Card

Name on Credit Card: _____

Credit Card Number: _____ Expiration Date: _____

Billing Address of Card: _____

How did you hear about this course offering?: _____

Do you have any dietary restrictions?: _____

Signature _____ Date _____

Return completed application to **Judy Mandrick**, Administrative Assistant, Disaster & Emergency Services:
American Red Cross, Greater Rochester Chapter, 50 Prince Street, Rochester NY 14607
or contact via email at mandrickj@grcarc.org or telephone at (585)241-4480