

# ONSITE REGISTRATION FORM

## SBM 32<sup>nd</sup> ANNUAL MEETING & SCIENTIFIC SESSIONS

April 27-30, 2011 • Washington Hilton • Washington, D.C.

SOCIETY of BEHAVIORAL MEDICINE

### 1. General Information

Clearly type or print all information: Your name, degree and organization, as indicated below, will appear on your meeting badge.

First Name MI Last Name Degree

Organization

Address

City State/Province Zip/Postal Code Country

Daytime Telephone (include country and city codes) Fax (include country and city codes) E-mail Address

This address is:  Home  Business

Check this box if you do not want this information included in the Attendee Directory.

Do you require any assistive devices, services or other accommodations to fully participate in the meeting?

Yes (If yes, please attach details of your specific needs.)

In case of an emergency, please contact:

Name Telephone Relationship

### 2. SBM Membership Status

**Please check the appropriate box:**

- I am a SBM Member and have paid my 2011 dues.
- I am renewing my 2011 membership by enclosing the member renewal form and dues payment along with this completed registration form. Renewal forms can be found at the Member's Only section of the SBM website at [www.sbm.org](http://www.sbm.org).
- I would like to join SBM. (Please submit a membership application with payment along with this completed registration form. Applications can be found on the SBM website at [www.sbm.org](http://www.sbm.org).)
- I am not a member, nor do I plan on applying for membership.

### 3. Base Annual Meeting Registration Fees

The base Annual Meeting registration fee includes admittance to all educational sessions that do not require a ticket as well as the Poster Hall. Ticketed sessions appear in section 4 of this form.

#### SBM Members

Full/Associate/Emeritus \$370  
Transitional \$315  
Student/Trainee\* \$190

#### Non-Members

Non-Member \$670  
Non-Member Student/Trainee\* \$362

#### One-Day

One-Day Registration \$343

Please check day of attendance:

- Wednesday, April 27
- Thursday, April 28
- Friday, April 29
- Saturday, April 30

#### Press

Press Fee \$0  
(must include credentials)

**Sub-Total Base Registration Fee**

\*Student/Trainee Verification

I am a 2010-2011 student or post-doc at (institution name): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Program Start: \_\_\_\_\_ Program End: \_\_\_\_\_

My supervisor's name is: \_\_\_\_\_

### Spouse/Guest Registration

Registered spouses/guests will ONLY be admitted to the non-ticketed sessions and the Poster Hall. No registration is required for guests age 17 and under. Society members or authors/co-authors of abstracts may not use the guest fee discount registration. Guest Fee (limit 1) = \$50

**Guest Fee**

Name of Spouse/Guest as you wish it to appear on his/her meeting badge \_\_\_\_\_

#### 4. Course and Seminar Tickets and Fees

Descriptions of the Courses and Seminars can be found in the Final Program, located at the 2011 Annual Meeting website: [www.sbm.org/meeting/2011](http://www.sbm.org/meeting/2011)

Seminars and Courses will be held on Wednesday, April 27. There is a ticket associated with each Course and Seminar. You may register for a Course or Seminar independent of, or in addition to, base registration for the Annual Meeting.

<b>Seminars</b>	
<b>Wednesday, April 27, 12:00 – 2:45 pm</b>	
<input type="checkbox"/> Seminar 1:	Introduction to the Multiphase Optimization Strategy (MOST) for Building More Effective Behavioral Interventions
<input type="checkbox"/> Seminar 2:	Using the Internet to Translate Evidence-Based Interventions and Self-Management Information for Cancer Patients: Lessons from the Field
<input type="checkbox"/> Seminar 3:	Mind-body Skills Training for Resilience and Stress Management: Theoretical Foundations, Clinical Evidence and Public Health Applications
<input type="checkbox"/> Seminar 4:	Recruiting, Training, and Evaluating Peer Supporters: The Peers for Progress Network
<input type="checkbox"/> Seminar 5:	Acceptance and Commitment Therapy for Health Related Problems
<b>3:15 – 6:00 pm</b>	
<input type="checkbox"/> Seminar 6:	Getting SMART about Developing Individualized Sequences of Health Interventions
<input type="checkbox"/> Seminar 7:	Social Media Marketing and Health Behaviors: Industry Strategies, Consumer Behaviors, and Public Health Responses
<input type="checkbox"/> Seminar 8:	Gene-Environment Interplay in Health Behavior: From Mechanisms to Translation
<input type="checkbox"/> Seminar 9:	Using Empirical Binomial Hierarchical Bayesian Modeling (EBHBM) to Determine Whether a Behavioral Intervention Works Well for Some Participant Groups but Less so for Others
<input type="checkbox"/> Seminar 10:	Changing Behavior in Older Adults: Using Research to Impact Policy
<input type="checkbox"/> Seminar 11:	Clinical Seminar in Behavioral Activation Treatment for Depression With a Co-Morbid Health Condition

#### Reside in Washington, D.C., Maryland or Virginia?

We are offering one free seminar ticket—valued at \$100— to students or first time meeting attendees currently residing in Washington, D.C., Maryland or Virginia.

Check this box if this offer applies to you.

Seminar Fees: Full/Associate/Emeritus Members: \$100 per Seminar  
 Student/Trainee or Transitional Members: \$50 per Seminar  
 Non-Members \$150: per Seminar

**Sub-Total Seminar Fee**

# ONSITE REGISTRATION FORM

## SBM 32<sup>nd</sup> ANNUAL MEETING & SCIENTIFIC SESSIONS

April 27-30, 2011 • Washington Hilton • Washington, D.C.

SOCIETY of BEHAVIORAL MEDICINE

### 4. Course and Seminar Tickets and Fees, continued

Wednesday, April 27, SIG Course Schedule	Start	End	Cost
<input type="checkbox"/> <b>SIG 101: Cancer SIG Course</b> The Science of Cancer Prevention and Control in the Health Care Debate: Key Issues for Research	12:00 PM	6:00 PM	Full/Associate/Emeritus Members: \$163 Student/Trainee or Transitional Members: \$125 Non-Members: \$175
<input type="checkbox"/> <b>SIG 201: Complementary and Integrative Medicine and Spirituality SIG Course</b> Strategies for Success in Obtaining Funding for Research in CAM and Spirituality	1:00 PM	5:00 PM	Full/Associate/Emeritus Members: \$113 Student/Trainee or Transitional Members: \$83 Non-Members: \$128
<input type="checkbox"/> <b>SIG 301: Integrated Primary Care SIG Course</b> Assessment and Management of Suicidal Patients in Primary Care Clinics	8:30 AM	5:00 PM	Full/Associate/Emeritus Members: \$107 Student/Trainee or Transitional Members: \$69 Non-Members: \$127
<input type="checkbox"/> <b>SIG 401: Behavioral Informatics SIG Course</b> Towards Standardization and Reuse in Behavioral Informatics	1:00 PM	5:00 PM	Full/Associate/Emeritus Members: \$99 Student/Trainee or Transitional Members: \$69 Non-Members: \$114
<input type="checkbox"/> <b>SIG 501: Evidenced Based Behavioral Medicine and Health Decision Making SIG Course</b> Transdisciplinary Training for Evidence-Based Behavioral Practice: Best Practices for Individuals and Communities	11:00 AM	2:00 PM	Full/Associate/Emeritus Members: \$75 Student/Trainee or Transitional Members: \$45 Non-Members: \$90
<input type="checkbox"/> <b>SIG 601: Multiple Health Behavior Change SIG Course</b> Multiple Health Behavior Change: State of the Science and Opportunities for Collaboration	8:30 AM	4:00 PM	Full/Associate/Emeritus Members: \$100 Student/Trainee or Transitional Members: \$75 Non-Members: \$125
<input type="checkbox"/> <b>SIG 701: Student SIG and Education, Training and Career Development Council Course</b> Applying to Psychology Internships in Behavioral Medicine	2:30 PM	6:00 PM	Student/Trainee Members Only: \$0
<input type="checkbox"/> <b>SIG 801: Cancer SIG Course</b> Cancer SIG Mock Grant Review	8:00 AM	12:00 PM	Full/Associate/Emeritus Members: \$115 Student/Trainee or Transitional Members: \$85 Non-Members: \$130

Sub-Total Course Fee

### 5. Continuing Education Credits

Please select the credits desired and add \$25 per credit type. Applicants for continuing education credits must complete an online evaluation immediately following the Annual Meeting.

- |  |   |
|--|---|
| <input type="checkbox"/> American Dietetic Association (ADA) Credits<br>Member Number: _____<br>Note: ADA Membership is required | <input type="checkbox"/> AMA PRA Category 1 CME Credits for Physicians (PESI)   |
| <input type="checkbox"/> CE Credits for Psychologists (APA)<br>License Number: _____<br>State Licensed in: _____                 | <input type="checkbox"/> Continuing Education (CE) Contact Hours for Nurses (PESI)<br>License Number: _____<br>State Licensed in: _____         |
| <input type="checkbox"/> CHECH Credits (Certified Health Education Specialists)  | <input type="checkbox"/> Nursing continuing Education Units for Nurse Practitioners (AANP)<br>License Number: _____<br>State Licensed in: _____ |

Sub-Total Credits Fee

### 6. Society of Behavioral Medicine Fun Run/Walk

Meet in the Washington Hilton lobby near the Concierge Desk at 6:15 am on Saturday. The run will start at 6:30 am. Maps and directions will be available at the Concierge desk.

- Yes! I plan on participating in the SBM Fun Run/Walk (No additional fee)

## 7. Contributions

### Join the Trend and Become a Friend of SBM!

Meeting attendees who make a gift to SBM will find a "Friend of SBM" ribbon in their registration packet!

### Why donate?

Your gift – of any size – will help SBM do more to improve the health of the nation.

### Please direct my gift to:

- The Advocacy and Membership Development Campaign (AMDC)\*, which funds: \$\_\_\_\_\_ amount
- Student travel to the Annual Meeting
  - Public policy work designed to increase:
    - Research funding
    - The impact of behavioral medicine throughout healthcare reform implementation
    - The visibility of SBM
- Annual Meeting sponsorship \$\_\_\_\_\_ amount
- Supports crucial educational events: keynotes, master lectures, symposia and more
- SBM Reserves \$\_\_\_\_\_ amount
- A "savings account" for future programming

All donations will be acknowledged and tax deductible to the extent allowed by law.

**Sub Total    Sponsorship Contribution**

## 8. Payment

Add all fees entered on this form (sections 2-7) and enter the total at right.

**Total**

Registration forms received without payment will not be processed. Be sure to complete sections 2-7 of this form in order to calculate total fees. Checks must be made payable to Society of Behavioral Medicine in U.S. funds drawn on a U.S. Bank. No purchase orders will be accepted.

### Cancellation Policy

Any registration cancellations must be due to professional and/or personal/family health **emergencies** and be made in writing directly to the SBM national office by April 27, 2011. All cancellations are subject to a non-refundable \$50.00 administrative fee. Refunds will be processed following the Annual Meeting.

### Submission Instructions

**Online:** Register online at [www.sbm.org](http://www.sbm.org) or

**Fax:** Please fax this registration form along with credit card payment to the SBM National Office at **(414)276-3349** or

**Mail:** Please mail this form with appropriate check or credit card payment to:

**Society of Behavioral Medicine, 555 E. Wells St., Suite 1100, Milwaukee, WI 53202-3823.**

A confirmation of your registration will be mailed to you within 14 business days of receipt of your form. If you do not receive a confirmation within 14 days, please call the SBM National Office at (414)918-3156.

Method of Payment:  Check enclosed     VISA     Mastercard     American Express

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Cardholders' Signature \_\_\_\_\_