

# Registration Form

35<sup>th</sup> Conference of the Canadian Association for Music Therapy

*A Song for Everyone:  
The Voice of Music Therapy*



May 6 to 9, **2009** – Ottawa, Ontario

## Contact information

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Telephone (     ) \_\_\_\_\_

Address \_\_\_\_\_

City/Province \_\_\_\_\_

Postal Code \_\_\_\_\_

Email \_\_\_\_\_

I require adapted accessibility

## Meal and activities options

Select  the checkbox corresponding to your choices

Meal/Activity	Date	Fees	Registrations
Welcome Reception	May 6	free	<input type="checkbox"/>
AGM Luncheon	May 7	\$10	<input type="checkbox"/>
Boxed Lunch	May 8	\$10	<input type="checkbox"/>
Evening Banquet	May 8	\$65	<input type="checkbox"/>
Continental Breakfast in Residence	May 7	\$5	<input type="checkbox"/>
	May 8	\$5	<input type="checkbox"/>
	May 9	\$5	<input type="checkbox"/>

TOTAL FEES – MEALS/ACTIVITIES \$ \_\_\_\_\_ **1**

\*Vegetarian Menu  
option

## Pre-conference workshops and advanced training

Select  the checkbox corresponding to your choices  
Places are limited, reserve as soon as possible.

Activities	Date	Time	Places	Fees	Registrations
<b>Paul Newham</b> [English] Singing at the Extremes	<b>May 5</b>	9:00 - 16:00	20	\$60	<input type="checkbox"/>
<b>Jennifer Buchanan</b> [English] Positioning Yourself in the Music Therapy Marketplace ... Tips for Private Practice and Employed Music Therapists		12:30 - 16:30	15	\$35	<input type="checkbox"/>
<b>Amy Clements-Cortes</b> [English] Supervision Basics: Therapy Internship Supervision in Canada, Level 1	<b>May 6</b>	9:00 - 17:00	25	\$50	<input type="checkbox"/>
<b>Marianne Bargiel</b> [French] Supervision Basics: Therapy Internship Supervision in Canada, Level 1		9:00 - 17:00	25	\$50	<input type="checkbox"/>
<b>Diane Austin</b> [English] Vocal Psychotherapy in Action		10:00 - 16:00	24	\$60	<input type="checkbox"/>
<b>Music Therapy in Oncology advanced training course</b> [English and french] Part One Part Two Lucanne Magill, DA, MT-BC, Cheryl Dileo, PhD, MT-BC, Clare O'Callaghan, PhD, Amy Clements-Cortes, Mus M , MTA	<b>May 8</b> <b>May 9</b>	14:15 - 17:15 9:00 - 12:00	limited*	free	<input type="checkbox"/>

TOTAL FEES – PRE-CONFERENCE WORKSHOPS \$ \_\_\_\_\_ **2**

\*Music Therapy in Oncology Advanced Training Course is being offered during the conference for a limited number of participants. This bonus training is funded by the Canadian Music Therapy Trust Fund and is therefore free of charge. Pre-registration is a must as the number of participants is limited.

## Conference registration

Select  one checkbox

Registration	Early Bird * Postmarked by March 15-2009	REGULAR After March 15, 2009
CAMT Member	\$285.00 <input type="checkbox"/>	\$315.00 <input type="checkbox"/>
Non Member	\$360.00 <input type="checkbox"/>	\$390.00 <input type="checkbox"/>
Student or Intern CAMT Member	\$155.00 <input type="checkbox"/>	\$175.00 <input type="checkbox"/>
Student non Member	\$170.00 <input type="checkbox"/>	\$190.00 <input type="checkbox"/>
SINGLE DAY *		
CAMT Member	\$150.00 <input type="checkbox"/>	\$165.00 <input type="checkbox"/>
Non Member	\$175.00 <input type="checkbox"/>	\$195.00 <input type="checkbox"/>

CONFERENCE REGISTRATION FEES \_\_\_\_\_ \$ **3**

\* SINGLE DAY REGISTRATION, select one day only

THURSDAY  FRIDAY  SATURDAY



## Please print out this form and mail it to:

CAMT Conference 2009  
117 Springhurst Avenue  
Ottawa ON K1S 0E3  
Canada

Comments, special requests or needs

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Office Use Only			
Amt Received _____	Cheque <input type="checkbox"/>	Visa <input type="checkbox"/>	Date _____ Initial _____

## Total amount

Report each amount on the appropriate lines

\* All amounts are in **Canadian dollars**

Items	Fees
MEALS/ACTIVITIES	\$ _____ <b>1</b>
PRE-CONFERENCE WORKSHOP	\$ _____ <b>2</b>
CONFERENCE REGISTRATION	\$ _____ <b>3</b>
<b>TOTAL PAYMENT</b>	\$ _____

\*Registration Fees are refundable until April 30, 2009 by written request. A \$55 cancellation fee will be charged. No refunds after April 30, 2009. A receipt will be provided to you at the conference. The cashing of your cheque/Visa confirmation confirms your registration.

## Options of payment

Cheque Please make cheques payable to:  
CAMT Conference 2009

VISA Only VISA will be accepted

Name of cardholder:

\_\_\_\_\_

Visa number:

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Signature of cardholder

Date d'expiration : \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_

## Conference information

Nicola Oddy, Co-chairperson

Élise Benoît, Co-chairperson

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