

# GEORGIA ASSN. FOR PLAY THERAPY ANNUAL CONFERENCE AND MEETING

## TOPICS

**FRIDAY MARCH 12, 2010**

USING RESEARCH-BASED THEME PATTERNS TO  
ENHANCE PLAY ASSESSMENT AND THERAPY

**SATURDAY MARCH 13, 2010**

AN INTEGRATED MODEL OF PLAY THERAPY FOR  
ATTACHMENT AND TRAUMA IN CHILDREN

**SPEAKER: HELEN BENEDICT Ph. D.**

(PLEASE NOTE THAT THIS CONFERENCE IS FOR MENTAL HEALTH PROFESSIONALS ONLY, I.E. THOSE WHO HAVE AN ADVANCED DEGREE IN A MENTAL HEALTH RELATED FIELD OR ARE CURRENTLY WORKING ON ONE)

SPONSORED BY THE GEORGIA ASSOCIATION FOR PLAY THERAPY.

### LOCATION

HOLIDAY INN SELECT, 6050 PEACHTREE INDUSTRIAL BLVD.

NORCROSS, GEORGIA 30071 770-448-4400

FOR A LINK TO THEIR WEBSITE SEE THE [FUTURE EVENTS](#) PAGE OF OUR WEBSITE  
[WWW.GAPT.ORG](http://WWW.GAPT.ORG)

DEADLINE TO REGISTER... [WED. MARCH 10, 2009 AT 7 PM](#)

REGISTRATION AT THE DOOR... [IS NOT AVAILABLE](#)

### ADA

ACCOMMODATIONS WILL BE MADE IN ACCORDANCE WITH THE LAW. IF YOU REQUIRE ADA ACCOMMODATIONS, PLEASE CONTACT TRUDY POST SPRUNK (770-491-7423) AT LEAST TWO WEEKS BEFORE THE CONFERENCE DATE SO THAT ARRANGEMENTS CAN BE MADE.

WORKSHOP COORDINATOR: TRUDY POST SPRUNK 770-491-7423

# CONTINUING EDUCATION CREDIT

## CONTINUING EDUCATION CREDIT--12 HOURS

THE CONFERENCE IS CO-SPONSORED BY THE GEORGIA ASSOCIATION FOR PLAY THERAPY AND THE INSTITUTE FOR CONTINUING EDUCATION. THE PARTICIPANT IS OFFERED 6.0 HOURS OF CONTINUING EDUCATION CREDIT PER DAY WITH FULL DAILY ATTENDANCE REQUIRED. THE CONTINUING EDUCATION PROCESSING FEE IS \$20 PER PERSON AND MAY BE PAID WITH THE REGISTRATION FEE.

THE FOLLOWING CE CREDIT IS PROVIDED BY THE INSTITUTE FOR CONTINUING EDUCATION:

**PSYCHOLOGY:** THE INSTITUTE FOR CONTINUING EDUCATION IS APPROVED BY THE AMERICAN PSYCHOLOGICAL ASSOCIATION (APA) TO SPONSOR CONTINUING EDUCATION FOR PSYCHOLOGISTS. THE INSTITUTE MAINTAINS RESPONSIBILITY FOR THE PROGRAM AND ITS CONTENTS.

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**MARRIAGE AND FAMILY THERAPY:** THE INSTITUTE IS AN APPROVED PROVIDER OF CONTINUING EDUCATION FOR MARRIAGE/FAMILY THERAPY BY THE FLORIDA DEPT. HEALTH, DIVISION MENTAL HEALTH, COUNSELING, AND MFT, PROVIDER BAP 255, EXPIRATION 03/2011.

**NURSING:** THE INSTITUTE FOR CONTINUING EDUCATION IS AN ACCREDITED PROVIDER IN NURSING BY THE ALABAMA BOARD OF NURSING, PROVIDER NO. 1124.

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**PLAY THERAPY:** THE INSTITUTE IS APPROVED BY THE ASSOCIATION FOR PLAY THERAPY TO OFFER CONTINUING EDUCATION SPECIFIC TO PLAY THERAPY. APT PROVIDER #98-040.

## ABOUT OUR SPEAKER

### BIOGRAPHICAL INFORMATION

HELEN BENEDICT Ph.D.

PROFESSOR AND ASSOCIATE DIRECTOR OF CLINICAL TRAINING, CLINICAL PSYCHOLOGY PROGRAM; CORE CLINICAL FACULTY MEMBER

PH.D., YALE UNIVERSITY; B.A. CONNECTICUT COLLEGE

RESEARCH INTERESTS: PLAY THERAPY; CHILD CLINICAL ASSESSMENT; INTELLECTUAL ASSESSMENT; LEARNING DISABILITIES; DEVELOPMENTAL PSYCHOPATHOLOGY.

"ONE MAJOR FOCUS OF RESEARCH HAS BEEN PLAY THERAPY AND ASSESSMENT WITH YOUNG CHILDREN. WE HAVE DEVELOPED A RELIABLE CODING SYSTEM FOR IDENTIFYING BOTH THEMES AND INTERPERSONAL RELATIONSHIPS EXPRESSED IN THE PLAY OF CHILDREN IN PLAY THERAPY. SEVERAL STUDIES HAVE BEEN CONDUCTED EXAMINING GENDER AND ETHNIC DIFFERENCES IN PLAY THEMES. OTHER STUDIES HAVE LOOKED AT DIFFERENT PATTERNS OF PREFERRED PLAY THEMES IN CHILDREN WHO HAVE EXPERIENCED DIFFERENT INTERPERSONAL STRESSES AND TRAUMAS IN THE EARLY YEARS OF LIFE. FOR EXAMPLE, CHILDREN WHO HAVE WITNESSED FAMILY VIOLENCE PLAY SUBTLY DIFFERENT THEMES THAN DO CHILDREN WHO HAVE BEEN PHYSICALLY ABUSED AND BOTH GROUPS SHOW MAJOR DIFFERENCES IN PLAY THEMES FROM CHILDREN WHO HAVE SUFFERED ATTACHMENT PROBLEMS. MORE RECENTLY, WE HAVE BEEN LOOKING AT SUCH INTERPERSONAL STRESSES AND TRAUMAS AS SEXUAL ABUSE, PARENTAL DEPRESSION, PARENTAL SUBSTANCE ABUSE, PARENTAL PERSONALITY DISORDERS, ABANDONMENT, NEGLECT, AND EMOTIONAL ABUSE IN TERMS OF THE PRIMARY IMPACT ON THE CHILD. WE ARE JUST BEGINNING TO DEVELOP A STANDARDIZED PLAY ASSESSMENT INSTRUMENT USING PLAY THEMES AND STUDENTS WORKING IN THE LAB WILL BE CONDUCTING PLAY ASSESSMENTS FOR BOTH NORMATIVE AND CLINICAL SAMPLES. WORK IS ALSO ONGOING STUDYING CHANGES IN PLAY THEMES ACROSS THE PLAY THERAPY PROCESS.

THE SECOND MAJOR RESEARCH IMPETUS HAS BEEN ON DISTURBANCES IN PARENT-CHILD ATTACHMENT. WE ARE NOW COLLECTING DATA ON EFFECTIVE ASSESSMENT MEASURES FOR USE WITH FOSTER AND ADOPTED CHILDREN. WE ARE ALSO BEGINNING TO EXPLORE THE RELATIONSHIP BETWEEN ATTACHMENT DIFFICULTIES AND THERAPEUTIC PROCESS, ESPECIALLY PLAY THERAPY."

## WHO SHOULD ATTEND

SCHOOL COUNSELORS AND PSYCHOLOGISTS, NURSES, COUNSELORS, MFT'S, PLAY THERAPISTS, SOCIAL WORKERS, PSYCHOLOGISTS, CHILD LIFE SPECIALISTS, ALCOHOL AND DRUG ABUSE COUNSELORS, ART THERAPISTS, MENTAL HEALTH GRAD STUDENTS, AND PASTORAL COUNSELORS. THERE IS NO PREREQUISITE FOR THIS CONFERENCE EXCEPT THAT YOU MUST BE A MENTAL HEALTH PROFESSIONAL WITH AN ADVANCED DEGREE IN A MENTAL HEALTH RELATED FIELD OR BE WORKING ON IT.

## VENDORS

VENDORS WILL BE ONSITE DURING THE CONFERENCE.

## RECEPTION/NETWORKING

GAPT WILL HOST A WINE AND CHEESE RECEPTION IMMEDIATELY AFTER THE CONFERENCE ON FRIDAY. SINCE TRAFFIC WILL BE DIFFICULT, WHY NOT PLAN TO STAY TO SOCIALIZE AND MEET THE SPEAKER? BOARD MEMBERS WILL ALSO BE AVAILABLE. IT WILL BE AN OPPORTUNITY TO NETWORK WITH OTHER ATTENDEES. NO ADDITIONAL CHARGE!!!!

## GOALS

**DAY ONE: USING RESEARCH-BASED THEME PATTERNS TO ENHANCE PLAY ASSESSMENT AND THERAPY.**

**OVERVIEW:** RECENT RESEARCH USING A NORMAL CONTROL GROUP HAS PROVIDED THEME PROFILES FOR YOUNG CHILDREN EXPERIENCING INTERPERSONAL TRAUMATIC EXPERIENCES SUCH AS ABUSE OR ATTACHMENT PROBLEMS. EFFECTIVE USE OF THESE PROFILES IN PLAY ASSESSMENT AND THERAPY WILL BE ILLUSTRATED IN DETAIL.

**GOALS:** PARTICIPANTS SHOULD BE ABLE TO:

- 1 DESCRIBE THE MAJOR THEMES AND INTERPERSONAL RELATIONSHIP CODES IN SAMPLES CHILDREN'S PLAY.
- 2 DESCRIBE TYPICAL PATTERNS OF PLAY THEMES FOR BOYS AND GIRLS WHO HAVE EXPERIENCED PHYSICAL ABUSE, SEXUAL ABUSE, ABANDONMENT OR PARENTAL DEATH, ATTACHMENT PROBLEMS, FAMILY VIOLENCE, PARENTS WITH PERSONALITY PROBLEMS, AND PARENTS WITH SUBSTANCE ABUSE PROBLEMS.
- 3 UTILIZE THE THEME CHECKLIST TO IDENTIFY PATTERNS OF THEMES, WHICH CAN THEN BE USED TO AID IN EVALUATING THE MAJOR CONCERNS FOR A GIVEN CHILD.
- 4 DESCRIBE SPECIFIC WAYS TO RESPOND TO VARIOUS THEMES DEPENDING ON THE THEMES PATTERNS SHOWN BY A GIVEN CHILD.

**DAY TWO: AN INTEGRATED MODEL OF PLAY THERAPY FOR ATTACHMENT AND TRAUMA IN CHILDREN.**

**OVERVIEW:** THIS WORKSHOP PRESENTS AN INTEGRATED, EVIDENCE-INFORMED PLAY THERAPY MODEL FOR YOUNG CHILDREN WHO HAVE EXPERIENCED ATTACHMENT AND/OR INTERPERSONAL TRAUMA. THIS MODEL, TO BE ILLUSTRATED USING VIDEO, INTEGRATES THE

NEUROSEQUENTIAL MODEL OF THERAPEUTICS (PERRY) WITH ATTACHMENT-FOCUSED PLAY THERAPY (BENEDICT)

GOALS: PARTICIPANTS SHOULD BE ABLE TO:

- 1 DESCRIBE THE CLINICAL ISSUES INVOLVED IN UNDERSTANDING ATTACHMENT PROBLEMS AND TRAUMA IN YOUNG CHILDREN;
- 2 CONDUCT AN ASSESSMENT OF BOTH ATTACHMENT RELATIONSHIPS AND TRAUMA HISTORY TO AID IN PLANNING TREATMENT;
- 3 CONDUCT ATTACHMENT FOCUSED PLAY THERAPY WITH THE CHILD INTEGRATING RELATIONSHIP THERAPY WITH NEURODEVELOPMENTAL ACTIVITIES AS NEEDED FOR TRAUMA;
- 4 IDENTIFY THE PROCEDURE TO COMBINE PSYCHO EDUCATIONAL AND ATTACHMENT AWARENESS FOR THE PARENT TO HELP THEM BE MORE EFFECTIVE IN PARENTING CHILDREN WITH TRAUMA AND ATTACHMENT ISSUES;
- 5 DEVELOP INTEGRATED SESSIONS WITH THE CHILD AND CAREGIVER TO HEAL TRAUMA AND ENHANCE THEIR ATTACHMENT RELATIONSHIP.

## ***FREE PARENTING LECTURE***

THE FOLLOWING PAGE HAS BEEN INCLUDED FOR MENTAL HEALTH PROFESSIONALS TO

***PRINT AND CIRCULATE***

**TO PARENTS WHO YOU FEEL MIGHT BENEFIT.**

THIS PRESENTATION IS **FOR PARENTS** AND **NOT MENTAL HEALTH PROFESSIONALS.**

PLEASE ENCOURAGE PARENTS OF CHILD CLIENTS TO ATTEND AND HAVE THE BENEFIT OF HEARING TRUDY POST SPRUNK GIVE TECHNIQUES FOR EFFECTIVE PARENTING.



# GEORGIA ASSOCIATION FOR PLAY THERAPY INC.

4893 LAVISTA ROAD  
TUCKER, GEORGIA 30084  
770-491-7423

WEBSITE [WWW.GAPT.ORG](http://WWW.GAPT.ORG)  
EMAIL...  
[TRUDYPOSTSPRUNK@CHARTER.NET](mailto:TRUDYPOSTSPRUNK@CHARTER.NET)

## GAPT OFFERS A FREE PARENTING LECTURE

TRUDY POST SPRUNK WILL PRESENT HER LECTURE TITLED *PARENTING WITH LOVE* ON SATURDAY MARCH 13, 2010 ROOM 201 12:15-1:15PM AT THE HOLIDAY INN SELECT, 5060 PEACHTREE INDUSTRIAL BLVD., NORCROSS, GEORGIA 770-448-4400.

PARENTING INVOLVES GIVING CHILDREN LOVE AND LIMITS, ROOTS AND WINGS, SELF ESTEEM, REASONABLE EXPECTATIONS, CLEAR MESSAGES, EMOTIONAL STABILITY, AND MUCH MORE. TRUDY WILL ALSO ADDRESS THE CHILD'S NEED FOR UNSTRUCTURED PLAY OPPORTUNITIES WITH PARENTS. SHE WILL GUIDE PARENTS TO LOOK AT REAL LIFE EXAMPLES OF HOW FAMILIES FUNCTION AND PROVIDE SPECIFIC LOGICAL NO-NONSENSE STRATEGIES TO ENHANCE FAMILY INTERACTIONS.

REGISTRATION IS BY EMAIL AT [TRUDYPOSTSPRUNK@CHARTER.NET](mailto:TRUDYPOSTSPRUNK@CHARTER.NET)

THOSE WISHING TO ATTEND NEED ONLY PROVIDE THEIR NAME AND THE NUMBER ATTENDING IN THEIR PARTY.

TRUDY POST SPRUNK IS AN LMFT, CPT, LPC, RPT, AND IS EMDR CERTIFIED. SHE IS ALSO AN RPT, CPT, AAMFT, LMFT APPROVED SUPERVISOR, AND IS ON THE LPCA REGISTRY OF SUPERVISORS. TRUDY HAS BEEN A PSYCHOTHERAPIST FOR 38 YEARS AND HAS PRESENTED AT INTERNATIONAL, NATIONAL, AND LOCAL CONFERENCES AND HAS BEEN INTERVIEWED ON RADIO AND TV. SHE IS PAST-PRESIDENT OF APT AND IS PRESIDENT AND CO-FOUNDER OF GAPT.

# SCHEDULE

## FRIDAY

### SIGN IN

ANNUAL MEETING  
PRESENTATION

8:15-8:45 AM

8:45-9AM

9AM-NOON (15 MINUTE BREAK AT 10:30)

LUNCH

NOON-1:30 LUNCH (LUNCH IS INCLUDED IN YOUR FEE)

### OPTION DURING LUNCH

SUPERVISION\*\* IN ROOM 201

TRUDY POST SPRUNK

12:15-1:15 PM

(LIMIT 6 PARTICIPANTS) ONE-HOUR  
CERTIFICATE FOR SUPERVISION TOWARD

RPT, AND LICENSURE FOR LPC, LMFT,  
AND LCSW WILL BE PROVIDED

PRE-REGISTRATION REQUIRED

PRESENTATION

### SIGN OUT

1:30-5 PM (15 MINUTE BREAK AT 3:30)

5PM

NETWORKING WINE  
& CHEESE RECEPTION

5:15-6:15PM

## SATURDAY

### SIGN IN

SPECIAL PRESENTATION  
PRESENTATION

8:15-8:45 AM

8:45-9AM SPECIAL PRESENTATION

9AM-NOON (15 MINUTE BREAK AT 10:30)

LUNCH

NOON-1:30 LUNCH (LUNCH IS INCLUDED IN YOUR FEE)

### OPTION DURING LUNCH-NO CHARGE/NO CEC CREDIT

PSYCHOPHARMACOLOGY ETHICS FOR THE  
NON-PRESCRIBING MENTAL HEALTH  
THERAPIST

KENNETH CARTER Ph. D.

12:15-1:15 PM

OBTAIN YOUR LUNCH AND BRING IT BACK  
TO THE BALLROOM

PRESENTATION

### SIGN OUT

1:30-5 PM (15 MINUTE BREAK AT 3:30)

5PM

## WHAT YOU NEED TO READ & KNOW BEFORE YOU REGISTER

### STAYING AT THE HOTEL

GAPT PARTICIPANTS AT OUR EVENTS HELD AT THIS HOLIDAY INN USUALLY ARE ENTITLED TO A SPECIAL DISCOUNTED ROOM RATE.

AS A RESULT WE SUGGEST THAT YOU MAKE YOUR HOTEL RESERVATIONS BY TELEPHONE DIRECTLY WITH THE HOTEL AT 770-448-4400.

BE SURE TO INDICATE THAT YOU WANT THE **SPECIAL GAPT RATE** FOR PARTICIPANTS AT THE EVENT.

IF YOU ARE TOLD THAT THERE IS NO SPECIAL RATE AVAILABLE, PLEASE ASK FOR CAROL MILLER. THERE IS A DEADLINE OF **FEBRUARY 18** BUT IF YOU ARE LATE, SHE MAY BE ABLE TO HELP YOU OBTAIN THE DISCOUNT.

**LUNCH** IS INCLUDED IN YOUR FEE. IT WILL BE A BUFFET LUNCH. IF YOU HAVE SPECIAL DIETARY NEEDS, PLEASE CONTACT CAROL MILLER AT THE HOTEL WHO WILL WORK WITH YOU. WE SUGGEST THAT YOU CALL HER AT 770-448-4400 ABOUT A WEEK BEFORE THE EVENT.

**CANCELLATION POLICY** CANCEL BEFORE FEBRUARY 24—FULL REFUND...CHECK WILL BE SENT WITHIN A WEEK OF NOTIFICATION.

FEBRUARY 24-MARCH 10--50% IS FORFEITED. THE OTHER 50% BECOMES A CREDIT TO A FUTURE GAPT EVENT.

AFTER MARCH 10 NO REFUND OR CREDIT.

ALL CORRESPONDENCE REGARDING CANCELLATIONS, CREDITS, REFUNDS, ETC. MUST BE MADE IN WRITING AND CAN BE DONE VIA EMAIL.

GAPT HAS A LONG STANDING POLICY WHEREBY THE BOARD REVIEWS REQUESTS FOR REFUND OR CREDIT WHICH DO NOT FIT OUR POLICY, ON A CASE-BY-CASE BASIS. EXAMPLES WOULD INCLUDE BUT NOT BE LIMITED TO ACTS-OF-GOD. AN EXAMPLE OF AN ACT-OF-GOD IS A TORNADO. THE BOARD WILL CONTINUE TO CONSIDER SUCH REQUESTS.

**NOTIFICATION** THAT YOUR REGISTRATION HAS BEEN RECEIVED AND APPROVED WILL BE SENT VIA EMAIL TO THE EMAIL ADDRESS YOU PROVIDE ON YOUR REGISTRATION FORM. WE WILL BEGIN PROCESSING REGISTRATIONS ON **JANUARY 31, 2010**.

**YOUR CONFIRMATION** WILL BE SENT WHEN WE COMPLETE YOUR REGISTRATION. REGISTRATION IS NOT COMPLETE UNTIL YOUR CHECK HAS BEEN DEPOSITED OR YOUR CREDIT CARD APPROVED. IF YOU SEND INCOMPLETE INFORMATION WE WILL CONTACT YOU.

## HOW TO REGISTER

- 1 **MAIL** CHECK AND REGISTRATION FORM (ALSO THE STUDENT DISCOUNT FORM IF APPLICABLE) TO GAPT, 3951 MUIRFIELD SQ., DULUTH, GA 30096. IT IS STRONGLY SUGGESTED THAT YOU **NOT USE** THIS OPTION AFTER MARCH 5 BECAUSE IF IT IS NOT RECEIVED BY THE DEADLINE, YOUR REGISTRATION WILL BE RETURNED. THERE WILL BE **NO REGISTRATION AT THE DOOR.**
- 2 **FAX** YOUR REGISTRATION FORM (AND STUDENT DISCOUNT FORM IF APPLICABLE) TO 770-813-3287 BE SURE TO INCLUDE CREDIT CARD INFORMATION FOR PAYMENT. PLEASE NOTE THAT THIS PHONE NUMBER IS A SECURE PHONE LINE THAT CAN BE USED FOR EITHER FAX OR VOICE CONTACT. MESSAGES CAN ALSO BE LEFT IF WE ARE NOT AVAILABLE.
- 3 **CALL** DAVID, OUR TREASURER AT 770-813-3287. HE WILL TAKE YOUR REGISTRATION AND CREDIT CARD INFORMATION ON THE PHONE.

PLEASE...**ONLY CALL DAVID** WITH REGISTRATION QUESTIONS. SINCE TRUDY DOES NOT DO REGISTRATION, WE URGE YOU **NOT TO CALL** HER OFFICE WITH GAPT REGISTRATION QUESTIONS. SUCH CALLS **WILL** DELAY YOUR REGISTRATION.

## REGISTRATION FEES TO ATTEND THE CONFERENCE

GAPT MEMBER*	\$ 90	<u>PER DAY</u>
NON-MEMBER	100	<u>PER DAY</u>
STUDENT**	70	PER DAY

\* IF YOU ARE UNSURE IF YOU ARE A CURRENT MEMBER OF GAPT/APT, PLEASE GO TO THE APT WEBSITE [WWW.A4PT.ORG](http://WWW.A4PT.ORG) AND VERIFY YOUR STATUS.

\*\* TO QUALIFY FOR THE STUDENT RATE, COMPLETE THE APPLICATION FOR STUDENT DISCOUNT RATE (FOLLOWING PAGE) AND INCLUDE IT WITH YOUR REGISTRATION. **ONLY STUDENTS IN A MENTAL HEALTH DEGREE PROGRAM** QUALIFY FOR THE STUDENT DISCOUNT.

## OPTIONAL FEES

CEC FEE	\$20	IF ORDERED PRIOR TO MARCH 10, 2010. SUBSEQUENTLY, YOU MAY ORDER A CEC FORM BY CONTACTING LINDA LAKEMAN AT 800-557-1950.
		THE FEE IS THE SAME AMOUNT REGARDLESS OF WHETHER YOU ATTEND ONE OR BOTH DAYS
SUPERVISION FEE	\$35	PLEASE NOTE THAT SUPERVISION IS LIMITED TO SIX (6) AND IT IS USUALLY FILLS QUICKLY.

**TO REGISTER YOU NEED TO**  
**PRINT AND COMPLETE THIS PAGE...**

**DEADLINE TO REGISTER IS MARCH 10, 2010 AT 7 PM**

NAME (PLEASE PRINT) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL \_\_\_\_\_ WORK PHONE \_\_\_\_\_

EMAIL ADDRESS (PLEASE PRINT CAREFULLY) \_\_\_\_\_

INITIAL IF YOU ARE A CURRENT MEMBER OF APT/GAPT \_\_\_\_\_

ALSO.... INITIAL IF YOU ARE AN RPT \_\_\_\_\_

OR.... INITIAL IF YOU ARE AN RPT-S \_\_\_\_\_

FOR FEES INFORMATION, SEE THE PRIOR PAGE

FEES...

REGISTRATION FEE-FRIDAY \$ \_\_\_\_\_ IF YOU ARE ATTENDING ONLY 1 DAY PLEASE BE

REGISTRATION FEE-SATURDAY \_\_\_\_\_ SURE TO USE THE PROPER LINE.

CEC FEE...OPTIONAL \_\_\_\_\_ EITHER ENTER \$20 OR LEAVE IT BLANK

FRIDAY SUPERVISION...OPTIONAL \_\_\_\_\_ EITHER ENTER \$35 OR LEAVE IT BLANK

TOTAL ENCLOSED \_\_\_\_\_

MAKE YOUR CHECK PAYABLE TO **GAPT** OR...PAY BY CREDIT CARD:

( ) VISA ( ) M/CARD # \_\_\_\_\_

EXP. (MO/YR) \_\_\_\_\_ SIGNATURE \_\_\_\_\_

GAPT OFFICE USE ONLY

INVOICE # \_\_\_\_\_

CAPTURED \_\_\_\_\_

REFERENCE # \_\_\_\_\_

APPLICATION FOR STUDENT DISCOUNT RATE  
FOR AN EVENT OF THE GEORGIA ASSN. FOR PLAY THERAPY

TO THE STUDENT:

GAPT GRANTS STUDENT RATES FOR MOST EVENTS. IN ORDER TO QUALIFY, THE FOLLOWING INFORMATION MUST BE COMPLETED BY THE APPLICANT AND SIGNED BY HIS/HER PROFESSOR. PLEASE INCLUDE THIS FORM WITH YOUR REGISTRATION FORM AND PAY THE STUDENT RATE. IF YOUR REQUEST FOR THE STUDENT RATE IS DECLINED, YOU WILL BE NOTIFIED.

TO THE STUDENT'S PRIMARY PROFESSOR:

I CERTIFY THAT \_\_\_\_\_ IS PURSUING AN ADVANCED DEGREE IN A **MENTAL HEALTH DEGREE PROGRAM** DURING THE CURRENT ACADEMIC SEMESTER/QUARTER.

FIELD OF STUDY...COMPLETE ONE:

MASTERS DEGREE PROGRAM IN \_\_\_\_\_

ED. S DEGREE PROGRAM IN \_\_\_\_\_

DOCTORAL DEGREE PROGRAM IN \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF PROFESSOR

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DEPARTMENT

\_\_\_\_\_  
NAME OF INSTITUTION

\_\_\_\_\_  
DATE