

## Registration Form

**PLEASE PRINT ALL DETAILS CLEARLY**

Please tick here if you do not wish to have your name and town appearing on the delegate list. The College's Data Protection Statement can be viewed at [www.rcpsych.ac.uk/dataprotection](http://www.rcpsych.ac.uk/dataprotection)

### 1. Personal details (please complete in block capitals)

College membership number:			
Title:	First Name:	Surname:	
Place of Work:			
Mailing address:			
Town:	Postcode:	Country:	
Email:			Tel (Daytime):
Vegetarian: YES/NO	Special diets:		
Special Requirements:			
Career Status (tick one box only):			
<input type="checkbox"/> MEDICAL STUDENT/STUDENT ASSOCIATE	<input type="checkbox"/> SHO		
<input type="checkbox"/> PMPT	<input type="checkbox"/> ASSOCIATE SPECIALIST/STAFF GRADE/SpR		
<input type="checkbox"/> CT/ST1-3	<input type="checkbox"/> RETIRED		
<input type="checkbox"/> CT/ST4-ST6	<input type="checkbox"/> CONSULTANT		
<input type="checkbox"/> FY DOCTOR	<input type="checkbox"/> OTHER (please state):		

### 2. Registration fees

Fees include catering during scheduled programme breaks but **do not** include accommodation.

	EARLY BIRD FEE* Standard Rate****	EARLY BIRD FEE* Reduced Rate***	LATE FEE** Standard Rate****	LATE FEE** Reduced Rate***	Invited Speaker†
<b>Whole conference</b>	£370 <input type="checkbox"/>	£180 <input type="checkbox"/>	£420 <input type="checkbox"/>	£205 <input type="checkbox"/>	£0 <input type="checkbox"/>
<b>Thursday only</b>	£190 <input type="checkbox"/>	£90 <input type="checkbox"/>	£205 <input type="checkbox"/>	£100 <input type="checkbox"/>	£0 <input type="checkbox"/>
<b>Friday only</b>	£190 <input type="checkbox"/>	£90 <input type="checkbox"/>	£205 <input type="checkbox"/>	£100 <input type="checkbox"/>	£0 <input type="checkbox"/>
<b>Gala dinner (Thu)</b>	£50 <input type="checkbox"/>	£50 <input type="checkbox"/>	£50 <input type="checkbox"/>	£50 <input type="checkbox"/>	£40 <input type="checkbox"/>
				<b>Total:</b>	

\* This rate applies only to registrations submitted with payment and received by the CALC Office by **30 September 2014**.

\*\* This rate applies to registrations submitted with payment and received by the CALC Office **after 30 September 2014**.

\*\*\* The reduced fee is available only to the **first 100 bookings** RCPsych Retired members and from SpRs, ST/CT1-6 members, SHO, PMPT and delegates on the concessionary subscription rate of 50%. **Important: Please note that the Standard Rates \*\*\*\* will apply to ALL bookings once 100 spaces at the Reduced Rate are filled**

\*\*\*\* The Standard Rate applies to Consultants/Locum Consultants, SAS Doctors, Non RCPsych members

† Invited speakers are entitled to free registration on the day they speak only

All registration confirmation letters will be sent via email. If you are unsure if your registration form has been received by us contact [rbrake@rcpsych.ac.uk](mailto:rbrake@rcpsych.ac.uk)

### 3. Parallel workshop/session attendance

Please indicate which parallel sessions and workshops you wish to attend, ranking your choices in order of preference. Spaces are limited and will be allocated on a first come first served basis.

#### THURSDAY 16 OCTOBER 2014

##### 3 PARALLEL SESSIONS: THURSDAY 11:30-13:00

	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	3 <sup>rd</sup> Choice
P1. Policy updates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P2. Working together to improve services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P3. New Developments in Psychiatry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

##### 5 PARALLEL MASTERCLASSES & PRIZE PRESENTATIONS: THURSDAY 14:15-15:15

	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	3 <sup>rd</sup> Choice
M1. Management of Physical Health Emergencies in Psychiatric Settings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M2. Management of pregnancy and women's health in psychiatric settings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M3. 'In the hotseat'	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M4. Rapid Tranquillisation – an update	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M5. Management of Treatment Refractory Depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M6. Faculty research prize oral presentations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

##### 3 PARALLEL SESSIONS: THURSDAY 15:45-17:15

	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	3 <sup>rd</sup> Choice
P4. "Interfaces"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P5. Application of new technologies to mental health care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P6. Advances in the Psychopharmacology of Affective Disorders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### FRIDAY 17 OCTOBER 2014

##### 3 PARALLEL SESSIONS: FRIDAY 11:10-12:40

	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	3 <sup>rd</sup> Choice
P7. Debate: 'This house believes that the current diagnoses of bipolar II disorder and borderline personality disorder are indistinguishable'	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P8. Leadership and training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P9. Risk management and personality responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

##### 3 PARALLEL SESSIONS: FRIDAY 13:50-15:20

	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	3 <sup>rd</sup> Choice
P10. Chronic Fatigue Syndrome	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P11. Symposium on Schizophrenia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P12. Higher trainees and newly-qualified consultants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

##### 5 PARALLEL MASTERCLASSES: FRIDAY 15:50-16:50

	1 <sup>st</sup> Choice	2 <sup>nd</sup> Choice	3 <sup>rd</sup> Choice
M7. Management of Physical Health Emergencies in Psychiatric Settings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M8. Management of pregnancy and women's health in psychiatric settings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M9. Management of OCD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M10. Rapid Tranquillisation – an update	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M11. Forgotten Pharmaceuticals / Management of Comorbid EtOH / drug misuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 4. Payment

### PLEASE NOTE THAT THE COLLEGE IS UNABLE TO INVOICE FOR REGISTRATION FEES

Places can only be reserved when payment is received with this form. If an authority is to pay, the delegate should either pay and then claim reimbursement from the authority or enclose payment from their authority.

- Cheque:** I enclose a cheque / postal order for £ .....  
*Please make payable to 'The Royal College of Psychiatrists' quoting reference GAP14 and the name of the delegate on reverse*
- BACS:** I enclose remittance advice form for £ .....  
*Places can only be reserved when remittance is received with this form*
- Credit/debit card:** Please debit my Visa/Delta/Mastercard (circle as appropriate) for £.....  
Please note that we do **not** accept American Express, Visa Electron, Solo or Laser Cards

Card number \_\_\_\_\_

Expiry date \_\_\_\_\_ Issue number/start date (Switch only) \_\_\_\_\_ CCV/Security Code \_\_\_\_\_

Name as appears on card \_\_\_\_\_

Signature \_\_\_\_\_

**These details will be destroyed once payment has been successfully processed**



#### DATA PROTECTION STATEMENT

The College's Data Protection Statement can be viewed at <http://www.rcpsych.ac.uk/dataprotection>

#### Please complete and return your registration form with your payment to:

Rosanne Brake  
Centre for Advanced Learning and Conferences (CALC)  
RCPsych  
21 Prescott Street, London E1 8BB  
Tel: 0203 701 2622  
Fax: 0203 701 2761

#### CANCELLATION POLICY

(Notice must be given in writing by post or e-mail [rbrake@rcpsych.ac.uk](mailto:rbrake@rcpsych.ac.uk))

To be entitled to a refund all cancellations MUST be received in writing no later than 2 weeks prior to the event date. An 80% refund will be given if cancelled more than 4 weeks prior to the event and 50% refund if less than 4 weeks' notice is given. No refund will be given if cancellations are received within 2 weeks before the event. Should you be unable to attend, a substitute delegate is welcomed.