



## 2010 Training the Trainer Application

### Application Information

\*To apply fill out this application form and include a letter of support by either your state Program Director, Executive Director, or Board President  
**(Application/s DEADLINE is March 8, no applications will be accepted after this date)**

Full Name:			Date:					
<i>Last</i>	<i>First</i>	<i>M.I.</i>						
Address:								
<i>Street Address</i>			<i>Apartment/Unit #</i>					
<i>City</i>			<i>State</i>	<i>ZIP Code</i>				
Phone:		E-mail Address:						
Title:	NAMI Organization:		Training (please circle / highlight) for:					
			F2F	FAF	IOOV	P2P	Basics	SG

### Program Trainings

Program	Date	Fee
<b>Family-to-Family De Familia a Familia</b>	Thursday, April 22 (2:00 p.m.) – Sunday, April 25 (12:00 noon)	\$450.00
<p>* It is understood that policies and fidelity to program practices must be adhered to at all times.</p> <p><input type="checkbox"/> Teacher has taught at least through class 7 of the 12 week course.</p> <p><input type="checkbox"/> Trainer agrees to train a minimum of two state training cycles.</p>		
<b>In Our Own Voice</b>	<i>Dinner Provided Thurs. 6:30 p.m.</i> Friday, April 23 (9:00 a.m.) – Sunday, April 25 (12:00 noon)	\$450.00
<p>* It is understood that policies and fidelity to program practices must be adhered to at all times.</p> <p><input type="checkbox"/> IOOV presenter has 1 year of experience and/or has made 3 or more presentations in the last year.</p> <p><input type="checkbox"/> Presenter agrees to train a minimum of two training cycles.</p>		
<b>Peer-to-Peer</b>	<i>Dinner Provided Thurs. 6:30 p.m.</i> Friday, April 23 (9:00 a.m.) – Sunday, April 25 (12:00 noon)	\$450.00
<p>* It is understood that policies and fidelity to program practices must be adhered to at all times.</p> <p><input type="checkbox"/> Must have taught one full 9 - week P2P course.</p> <p><input type="checkbox"/> Trainer agrees to train a minimum of two state training cycles.</p>		
<b>NAMI Basics</b>	Thursday, April 22 (6:00 p.m.) – Sunday, April 25 (12:00 noon)	\$450.00
<p>* It is understood that policies and fidelity to program practices must be adhered to at all times.</p> <p><input type="checkbox"/> Must have taught one full 6 – session Basics course.</p> <p><input type="checkbox"/> Trainer agrees to train a minimum of two state training cycles.</p>		
<b>Family Support Group</b>	Friday, April 23 (6:00 p.m.) – Sunday, April 25 (12:00 noon)	\$350.00
<p>* It is understood that policies and fidelity to program practices must be adhered to at all times.</p> <p><input type="checkbox"/> Facilitator agrees to train a minimum of two state training cycles.</p>		

## Lodging Information

PLEASE READ CAREFULLY

**All guest rooms are DOUBLE OCCUPANCY.** You must check one of the following boxes if you would like a single room or an early arrival; otherwise, no special arrangement will be made for you. You will not be guaranteed an early arrival room at the Hilton and will be subject to making your own reservations at a different hotel if room is not available.

- I request a single room. I understand I will be charged half the room rate of \$101.97 at \$50.98. Total amount for 2 nights, \$101.97 and 3 nights \$152.54 and must send payment (check or credit card #) to NAMI, attn: Ana Ferrara, **before March 8, 2010** to reserve the room.
- I need to arrive a day early on Wednesday/Thursday, April 21- 22. I understand I will be charged \$101.97 for the room and must send payment (check or credit card #) to NAMI, Attn: Ana Ferrara, **before March 8, 2010** to reserve the room.
- I plan to stay in St. Louis following the Training of Trainers. I understand that I will be responsible for the extra night lodging payment upon my check-out from the hotel.
- I do not require any special lodging.

**\*\* Applications will not be processed until ALL payments are received.**

**Please check any box that applies to your dietary needs:**

- I am a vegetarian. Please identify foods you are unable to eat:

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- I am allergic to certain foods/spices. Please identify foods/spices you are unable to eat:

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**\*\*PLEASE RETURN APPLICATION, PAYMENT(S), AND LETTER OF SUPPORT NO LATER THAN MARCH 8 TO ANA FERRARA BY FAX 703/524-9094 OR E-MAIL: [2010trainthetrainer@nami.org](mailto:2010trainthetrainer@nami.org)**

### Credit Card Information

<b>Name/Organization as it appears on credit card:</b>				
	<i>Last</i>	<i>First</i>	<i>M.I.</i>	<b>Date:</b>
<b>Address:</b>				
	<i>Street Address</i>		<i>Apartment/Unit #</i>	
	<i>City</i>	<i>State</i>	<i>ZIP Code</i>	
<b>Phone:</b>	<b>Credit Card Type:</b>		<b>Credit Card #:</b>	
<b>Security Code:</b>	<b>Expiration Date:</b>	<b>Type of Charge ( Hotel Room/ Training Fee):</b>		
<b>Comments:</b>				

### PAYMENT POLICY

- You must submit single room, early arrival, and trainer fee on or before **March 8** to reserve a hotel room and guarantee registration.
- If you would like to pay by credit card, please fill out the credit card section above.
- A 10% penalty fee will be added to the total fee for late payment.

#### CANCELLATIONS AND CHANGES TO YOUR REGISTRATION

- 1) No applications will be accepted after March 8.
- 2) If you need to cancel a registration between **March 8 and March 18**, we will return 50% of your registration fee.
- 3) If you cancel after **March 18**, we will return 20% of your registration fee. A reimbursement will be processed 3 weeks after training.

**Please Note:** After **March 19** all cancellations must be submitted to Ana Ferrara via:

E-mail to: [2010trainthetrainer@nami.org](mailto:2010trainthetrainer@nami.org)

OR

fax to 703-524-9094 attn: Ana

OR U.S. Mail to Ana Ferrara:

NAMI Education Department  
3803 N. Fairfax Drive; Suite 100  
Arlington, VA 22203

We look forward to seeing you in St. Louis, MO!