

**Empowering Persons with Psychiatric Disabilities: The Role of the Peer Model in CILs**

2013 H Street NW Sixth Floor  
Washington, D.C. 20006  
Fax: (202) 207-0341

June 2-4, 2015; Baltimore, MD

1. Complete the form   2. Save the form   3. Email the form to [Rie@ncil.org](mailto:Rie@ncil.org)

Yes! Please register me for Empowering Persons with Psychiatric Disabilities: The Role of the Peer Model in CILs, June 2-4, 2015!

**Registrant Information**

Prefix and Name:

Title:

Type of Position:       Type of Organization:

Organization:

Address:       Phone:

City, State, Zip:       Fax:

Email:

**Auxiliary Aids**

Materials:    Standard Print    Large Print    Braille    Audio on CD    Text-Only

Diet:    Standard Fare    Vegetarian    Salt-Free    Low Cholesterol   Other:

Accommodations:    American Sign Language    Transcripts    Contact Sign    Personal Assistant  
 CART    Assistive Listening Device   Other:

**Payment**

Please charge my:    Visa    MasterCard    American Express    Discover    I'm sending a check

Name on Card:

Card #:

Expiration:       CID / CIV:        Total: \$150.00

If paying by credit card, consider mailing or faxing this form; email does not provide encrypted delivery of your personal information.

Please make checks payable to National Council on Independent Living (Federal Tax ID: 74-2291620).