50th Annual Training Institute REGISTRATION FORM





Want to attend at a discounted rate?

Purchase an individual or student membership with your registration and take advantage of the reduced member registration rate!*

Add your selected membership cost to the "Grand Total" at the bottom.
*Membership rates pay for 1-year of APPA membership.

| 0000 | ☐ Individual - \$50 ☐ Student - \$25 | | | | | |
|---------------------------------------|---|----------------|-------------------------------------|----------------|--|--|
| Training Institute Registration Rates | | | | | | |
| | In-Person Registration Rates | | Virtual Registration Rates | | | |
| REGISTRATION TYPE | Through Jun 24 | After Jun 24 | Through Jun 24 | After Jun 24 | | |
| Student Member | □ \$195 | □ \$225 | □ \$50 | □ \$55 | | |
| Individual Member | \$610 | □ \$660 | □ \$100 | □ \$150 | | |
| Non-Member | \$670 | □ \$720 | □ \$100 | □ \$150 | | |
| Agency Member | □ \$625 | □ \$675 | N/A | | | |
| Guest Pass* | \$400 x (# of guests) *This rate is available to immediate family members not employed in the corrections field. | | *Virtual Registration not Available | | | |
| Local Host | \$450 | | *Virtual Registration not Available | | | |
| Faculty One Day | \$265 *Full registration same as individual pricing | | *Virtual Registration not Available | | | |
| Single Day* | \$325 Monday \$325 Tuesday \$245 Wednesday | | *Virtual Registration not Available | | | |
| ntensive Sessions* | \$50 Sunday 8am-12pm | | *Virtual Registration not Available | | | |
| | Virtual Registrat | ion Rates for | Agency Group | S | | |
| # of Staff | Through Jun 24 | | After Jun 24 | | | |
| 25 | □ \$1,500 | | □ \$1,625 | | | |
| 65 | □ \$3,575 | | \$3,860 | | | |
| 125 | □ \$6,250 | | □ \$6,750 | | | |
| 200 | \$9,000 | | □ \$9,720 | | | |

To designate which staff are to attend, please fill out: https://form.jotform.com/appaforms/2025-NYC-Agency-Group

| REGISTRATION INTO PLEASE PRINT CLEARLY | Agency / Organization Name: |
|---|---|
| First Name: | |
| Last Name: | Check if same address |
| Title: | Agency / Organization Address: |
| Address: | City: State: Zip: |
| City: State: Zip: | Country: |
| Country: | Phone : |
| Phone: | Email *: |
| Email: | *The above email address is what the registrant will use to log-in. |
| GRAND TOTAL | \$ |
| | Account Code: New York, 13061-43000 |
| PAYMENT Make checks payable to American Probation and Par Note: unless an agency invoice, payment in full must be made to g | |
| Check Enclosed Government Purchase Order | Enclosed PO#: |
| | |

In-Person Refund Policy

A full refund, less a \$50 processing fee, is available until Jul 18, 2025. No refunds are available after Jul 18, 2025. In order to receive a refund, written requests must be sent to the APPA Training Institute, c/o The Council of State Governments, 1776 Avenue of the States, Lexington, KY 40511 or emailed to kimberly.mills@csg.org. All requests for the refunds must be postmarked or emailed by Jul 18, 2025.

Virtual Refund Policy

Due to the cost of the virtual training institute platform, no refunds will be issued.

Send Your Registration Form and Payment via Mail

American Probation and Parole Association c/o Council of State Governments 1776 Avenue of the States Lexington, KY 40511