

April 21-24, 2014

SCHOLARSHIP OPPORTUNITY

Thank you for your interest in attending Recovery Coach Academy[®] for Washington State residents, April 21–24, 2014. These scholarships were established, with the support of Washington State Behavioral Health Service Integration Administration, to encourage and support individuals who wish to learn more about or become a Recovery Coach. A limited number of scholarships are available that cover \$250 toward the Recovery Coach Academy[®] registration fee for April 21–24, 2014. You'll receive 30 hours of training for only \$100!

Balance of registration fee (\$100), lodging costs, meals, and travel expenses are the responsibility of the attendee.

ELIGIBILITY

- Download registration form at www.evergreencpg.org and FAX or e-mail to ECPG (scholarship applicants cannot complete registration form online). Workshop registration MUST be sent in with scholarship application.
- Scholarship applicants must be ECPG members AND Washington State residents. You must plan to do Recovery Coach work in Washington State. Please visit www.evergreencpg.org → Membership or fill out the form in this application to become an ECPG member.

DEADLINE

Completed scholarship application form—with a completed workshop registration form—must be postmarked by March 24, 2014. Applications received after this date will be considered only if funding is available.

AWARDS

Scholarship recipients will be notified by April 1, 2014.

Submit completed application materials to:

Evergreen Council on Problem Gambling *RCA Scholarship Committee* 1801 Fourth Avenue East Olympia, WA 98506

Phone: 360.352.6133 FAX: 360.352.4133 E-mail: **info@evergreencpg.org** Website: **www.evergreencpg.org**

Washington State scholarships supported by:



BHSIA Behavioral Health and Service Integration Administration





April 21–24, 2014

Scholarship Application Form

(Applicants MUST be ECPG members and Washington State residents)

Name:				
Address:				
City:	State:	WASHINGTON	Zip:	
Day phone:		Cell/Alternate phone:		
E-mail address:				
Current Employer:				
Employer Address:	City:		State:	Zip:
Please briefly explain why you are interested in	n attending Recovery Co	ach Academy©:		
Please describe the skills and opportunities yo	u currently have to link	people in recovery to r	needed support within	your community:
How will you use the innovative approaches le	earned through Recovery	y Coach Academy© in w	vorking or volunteering	with people in recovery?
Signature:			_Date:	
By signing, I attest to the accuracy of the above informa	ation.			
Submit completed application postmark	ed by March 24, 2014	RCA Scholars 1801 Fourth	Council on Problem G hip Committee Avenue East Olympia, 133 F: 360.352.4133	-

ECPG/NCPG Joint Membership Application

(Applicants MUST be ECPG members)



E V E R G R E E N council on problem gambling



National Council on Problem Gambling

Name:	Company:				
Address:	Apt./Suite:				
City:	State/Province:	Zip/Postal:			
Phone:	Fax:				
E-mail address: All fields are required					

MEMBERSHIP OPTIONS

- **\$39** ECPG Membership—Special member discounted fees on quarterly trainings and conference registration (all offer CEUs), certification training workshops, quarterly newsletter, and member certificate.
- ___ \$74 Joint ECPG & NCPG Individual Membership—Includes ECPG Membership plus full National voting rights, 1-year subscription to NCPG newsletter, member certificate, bimonthly subscription to Addiction Professional as well as discounts on literature and conferences. This special offer is a \$114 value! The cost of NCPG Individual Membership alone is \$75 when purchased directly. Save \$40 through ECPG!
- _ \$99 Joint ECPG & NCPG Individual Plus Member—Includes all the benefits of ECPG & NCPG Individual Member level, with the addition of a subscription to *International Gambling Studies*, a peer-reviewed interdisciplinary journal in gambling studies. This special offer is a \$139 value! The cost of NCPG Individual Plus Membership alone is \$100 when purchased directly. Save \$40 through ECPG!

MEMBERSHIP PAYMENT

Today's Date:		Credit Card #:	
Method of Payment:	Visa®Master Card®	Expiration Date:	CSC #: (3 digits on back of credit card)
Check #: (Checks payable to Evergreen Cou		Signature:	

ECPG and NCPG are non-profit organizations. Your payment is tax deductible. Mail completed form with payment to: 1801 Fourth Avenue East | Olympia, WA 98506 | P: 360.352.6133 F: 360.352.4133 info@evergreencpg.org | www.evergreencpg.org