



**NAADAC**  
 National Association of Alcoholism  
 and Drug Abuse Counselors  
 1911 N. Fort Myer Drive, Suite 900  
 Arlington, VA 22209

Pennsylvania  
 Association of  
 Alcoholism and  
 Drug Abuse  
 Counselors

*InfoTrack*  
 and  
**Membership  
 Luncheon**

Friday, June 19  
 9:00 am–2:00 pm

Harrisburg Marriott  
 4650 Lindle Road  
 Harrisburg, PA 17111  
 717/564-5511

**Earn 3 CEUs**

Approved by  
 PCACB  
 NAADAC Provider # 0129



*Sponsored by*

**NAADAC**  
 National Association  
 of Alcoholism and  
 Drug Abuse Counselors

Details on the  
**JUNE 19**  
*InfoTrack...*  
 How will the Proposed  
 Licensure Bill affect you as  
 an addiction professional?

FIRST CLASS  
 U.S. Postage  
**PAID**  
 Permit No. 827  
 Washington, D.C.

# InfoTrack '98

## OBJECTIVES

- Learn how the proposed licensure bill will affect you and the alcoholism and drug abuse counseling profession.
- Become aware of national legislative issues that will affect you.
- Learn how to discuss the issue of licensure with colleagues and state and national congressional members.
- Learn how to assist in advocacy efforts on both state and national levels.

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## SPEAKERS

### Licensure Update Panel

Carmen Ambrosino, CAC, CPS,  
Committee Chairperson  
Patrick Palmer, CAC, CCS  
Richard Laban, CAS, CCB  
Mary Jo Mather, Executive Director,  
PCACB

Panel moderator: Sara Jane Gainor,  
NCAC II, CASC, LSW, NAADAC  
Mid-Atlantic Regional Vice President

**Making Contact: How to Lobby**  
NAADAC Staff Member

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## SCHEDULE

9:00-10:00 Registration and  
Networking Coffee  
10:00-11:30 Licensure Panel Update  
11:30-12:30 Membership Luncheon  
(to include election of new  
PAADAC officers)  
12:30-2:00 Making Contact: How to  
Lobby  
(hands-on training session)

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## COST

This program is sponsored by the National Association of Alcoholism and Drug Abuse Counselors (NAADAC). There is no cost to PAADAC/NAADAC members. See registration form for non-member fees.

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## PAADAC Registration Form

YES, I'm a PAADAC/NAADAC Member

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

*Do you have a question about the PAADAC/PCACB Licensure Bill to be addressed during this InfoTrack? (use additional sheets as needed)* \_\_\_\_\_

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## Non-member Registration

Yes, sign me up today as a member of  
NAADAC/PAADAC ..... \$75

No, I only want to attend the InfoTrack ..... \$35

### PAYMENT

Enclosed is a check for \$ \_\_\_\_\_, made payable to NAADAC.

Please charge the amount of \$ \_\_\_\_\_ to my  
 MasterCard  VISA  American Express

Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

**MAIL or FAX to:** NAADAC, 1911 N. Fort Myer Drive, Suite 900, Arlington, VA 22209  
FAX: 800/377-1136 or 703/741-7698

**QUESTIONS?** 800/548-0497 or 703/741-7686

**Cancellation/Refund Policy:** Cancellations must be made in writing. A \$15 service fee will be assessed if the cancellation is received on or before June 6, 1998; no refunds will be issued after this date.