Thank you for your interest in the Wellness Recovery Action Plan (WRAP ®) Workshop. Please fill out the registration form completely and return to Recover Wyoming to indicate your interest in the upcoming training. Space is limited, so register early!

 Registration forms must be submitted by Friday, March 24, 2017.

Once received you will be notified of your enrollment in the training.

WRAP® WORKSHOP

REGISTRATION FORM

Name:

Address:

Phone: E-mail:

Are you currently a Wyoming Peer Specialist or involved in a peer support role in some way?

 Yes No

Please describe for yes and no:

Explain why you are interested in the WRAP Workshop and how you will use it:

The training will be held April 5th-6th 2017 (8:30-5:00 both days) at Central Wyoming Counseling Center in Casper, WY.

Applicant Signature Date

Print Name

\*\*\*Training participants will be responsible for their own lodging, meals, and other travel costs.\*\*\*

Submit Registration Forms To:

Lana Mahoney

lanamahoney@recoverwyoming.org

or mail or fax to:

Recover Wyoming

122 W. Lincolnway- Cheyenne, WY 82001

(307) 421-7261; FAX (307) 222-0281

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