

# NEW YORK STATE BAR ASSOCIATION

## MEETING REGISTRATION FORM

Name \_\_\_\_\_

Firm \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Phone ( \_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_ ) \_\_\_\_\_

Spouse/Guest Name \_\_\_\_\_

Child Name(s) and Age(s) \_\_\_\_\_

### FEES

Attorney Registration Fee: \$425.00 \_\_\_\_\_

Non-member Registration Fee: \$600.00 \_\_\_\_\_

First Time Attendee Registration Fee\*: \$250.00 \_\_\_\_\_

Spouse/Guest Registration Fee: \$300.00 \_\_\_\_\_

Children (16 and under): FREE \_\_\_\_\_

*\*Business Law Section members that have never attended a Fall Meeting or have not attended since 2007*

### SOCIAL EVENTS

**Thursday, October 3, 2013**

**Welcome Reception and Dinner** \_\_\_\_\_ (No. attending)

**Friday, October 4, 2013**

**Reception and Dinner** \_\_\_\_\_ (No. attending)

Entree choices (please note each attendee's preference):

\_\_\_ Tenderloin of beef \_\_\_ Pistachio encrusted salmon \_\_\_ Vegetarian

### SPORTS & TOURS

**Tour of the Norman Rockwell Museum**

**\$20 per person** 2:00 p.m. Friday 10/4/13 \_\_\_\_\_ (No. attending)

**Golf Tournament**

**\$73 per person** 1:00 p.m. Friday 10/4/13 \_\_\_\_\_ (No. attending)

Name(s): \_\_\_\_\_

Handicap(s): \_\_\_\_\_

### PAYMENT INFORMATION

Check or money order enclosed.

(Make checks payable to New York State Bar Association)

Charge \$ \_\_\_\_\_ to  American Express  Discover

MasterCard  Visa Expiration Date \_\_\_\_\_

Card number: \_\_\_\_\_

Authorized Signature \_\_\_\_\_

## Business Law Section Fall Meeting

**October 3-5, 2013**

Cranwell Resort, Lenox, MA

### Hotel Information:

Call the Cranwell Resort directly to make your hotel reservations. The toll-free number is **1-800-272-6935**. Indicate you are with the NYSBA Business Law Section to receive the group rate of **\$299.00 plus tax, per night**. The cut-off date for the room block is **September 3, 2013**. After this date rooms will be available on a space and rate available basis.

### Registration fee includes:

Thursday's reception and dinner, Friday's MCLE programming and reception and dinner; and Saturday's MCLE programming. Guest fee includes Thursday's and Friday's reception and dinner.

**DIETARY NEEDS** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Cancellation Notice:

Notice of cancellation must be received by **September 23, 2013** in order to obtain a refund for registration fees.

### Fax or mail this form with registration fee(s) to:

Adriana Favreau  
Meetings Representative  
New York State Bar Association  
One Elk Street

Albany, New York 12207

Phone: 518.487.5630

Secure Fax: 518.463.5993

Email: afavreau@nysba.org

