New York State Bar Association
House of Delegates Meeting
Saturday, April 1, 2017

*****************************************************************************
Please return prior to Friday, March 17, 2017

To: Kim McHargue
New York State Bar Association
One Elk Street
Albany, New York 12207
Facsimile Number: 518/463-5993/E-mail: kmchargue@nysba.org

AGENDA MATERIALS*

___ Yes, I would like the agenda materials sent electronically

___ No, I prefer to have the agenda materials mailed to me

*If no selection is made, the materials will be mailed to you.

HOUSE OF DELEGATES DINNER, FRIDAY, MARCH 31, 2017

*There is a $35 surcharge for the dinner. Please return form with payment no later than March 17, 2017.

I ___ will ___ will not be able to attend the reception and dinner commencing at 6:00 p.m.

*****Due to space limitations, we are not able to accommodate guests for this dinner.

☐ Check or money order enclosed in the amount of $__________ (Please make checks payable to New York State Bar Association)

☐ Charge $________ to ☐ American Express ☐ Discover ☐ MasterCard ☐ Visa  Expiration Date ______

Card number: ____________________________________________

Authorized Signature __________________________________________

HOUSE OF DELEGATES MEETING, SATURDAY, APRIL 1, 2017

I ___ will ___ will not be able to attend the meeting commencing at 9:00 a.m.

___ Yes, I will join members of the House of Delegates for lunch at approximately 1:00 p.m.

___ I prefer a box lunch to go – THIS MUST BE PRE-ORDERED

________________________________ Member's Name  (please print)