

Family Law Section 2026 Annual Meeting

Thursday, January 15, 2026

New York Hilton Midtown, 1335 Avenue of the Americas, New York, NY 10019

ATTENDEE INFORMATION

Name: _____ Firm/Org: _____

City/State/Country: _____ Email: _____ Phone: _____

Dietary Restriction: _____ Special Accommodation: _____

REGISTRATION INFORMATION

CLE PROGRAM	Early Bird through 12/12/25 <input type="checkbox"/> \$150 NYSBA Members <input type="checkbox"/> \$395 Non-Members After 12/12/25 <input type="checkbox"/> \$250 NYSBA Members <input type="checkbox"/> \$395 Non-Members	NYSBA GENERAL REGISTRATION FEE* (A one-time fee required to attend <u>any</u> NYSBA CLE program) Includes the following special events on Wednesday, January 14, 2026: • Presidential Summit – 2:00 p.m. to 4:00 p.m. • 2026 Constance Baker Motley Symposium – 4:00 p.m. to 6:00 p.m. <i>*Note: If this fee was previously paid when registering for another Section's Annual Meeting CLE program, payment is not required again.</i>
	<input type="checkbox"/> \$195	Family Law Section CLE Program Thurs, 1/15/26 2:00 p.m. – 5:00 p.m. Grand Ballroom East, 3F, Hilton Midtown
ADD-ONS	<input type="checkbox"/> \$175 Family Law Section Member <input type="checkbox"/> \$200 Other	Family Law Section Luncheon** (includes 30-min cocktails and 1.5-hr luncheon) Thurs, 1/15/26 12:00 p.m. – 2:00 p.m. Grand Ballroom West, 3F, Hilton Midtown <i>**For table reservations, contact Carra Forgea at cforgea@nysba.org (If a table has already been purchased, individual luncheon payments are not required.)</i>
	<input type="checkbox"/> \$25 (limited tickets)	Family Law Section Chair's Reception Thurs, 1/15/26 6:00 p.m. – 8:00 p.m. Offsite Venue: TBD

NOTE:

- **Notice of cancellation** must be received by **Friday, January 2, 2026**, to obtain a refund of fees.
- **Kosher meal requests** must be made at least **two weeks before** the luncheon.

PAYMENT METHOD

☐ Check or money order enclosed in the amount of

\$ _____

Make checks payable to:

New York State Bar Association
1 Elk Street
Albany, NY 12207

☐ Card Charge \$ _____ to:

☐ AMEX ☐ MasterCard ☐ Visa ☐ Discover

Cardholder Name: _____

Card number: _____

Expiration date: _____ CVC: _____

Authorized Signature: _____

☐ Wire Transfer/ACH Delivery:

Account Name:
New York State Bar Association

Account No.: 777050803
Bank Routing No.: 021000021
SWIFT Code: CHASUS33

Bank: JPMorgan Chase
New York, NY 10017

Submit to: **Member Resource Center** at mrc@nysba.org | **Call:** 800-582-2452/(518)463-3724 | **Secure Fax:** (518)463-5993.
For questions, contact: Carra Forgea | Section Liaison, Program, and Event Manager | cforgea@nysba.org | (518) 487-5521