NEW YORK STATE BAR ASSOCIATION

Family Law Section Summer Meeting | Registration Form

-			Saratoga Springs, NY
lame:			
-irm:		Address:	:
City:	State:	Zip:	Email:
REGISTRAT	ION AND HOTEL AC	соммор	ATIONS MUST BE COMPLETED TOGETHER.
HOTEL ACCOMMODATIONS Hotel reservations are not guaranteed until you have received your confirmation via email from The Saratoga Hilton. All hotel rates are subject to Taxes and Service charges. Arrival Date: Departure Date: Special Requests: Specia			ACTIVITIES See page 6 for details Friday, July 12 Historic Walking Tour of Saratoga Racetrack (No.of ppl) \$20 pp Golf Tournament Saratoga National (No.playing) \$215 pp Name and handicap: Name and handicap: Lunch and Admission "The Easy Goer" at Saratoga Racetrack No. of ppl – \$80 per person/lunch and admission to the track
			Paddle Boarding or Kayaking Kayak Shak, Fish Creek No. of ppl – \$25 pp for three hour rental of single paddle
			board or kayakNo. of ppl – \$50 pp for three hour rental of tandem kayak Saturday, July 13 Paddle Boarding or Kayaking Kayak Shak, Fish CreekNo. of ppl – \$25 pp for three hour rental of single paddle board or kayakNo. of ppl – \$50 pp for three hour rental of tandem kayak Historic Mansion Saratoga/ North Broadway Walking TourNo. of ppl – \$10 pp
			Saratoga Lake General Schuyler Boat CruiseNo. of ppl – \$25 pp adultsNo. of children – \$15 pp (children 12 and under) Name and Age
			Name and Age
Program.	istration fee includes all of the above excluding the MCLE gram. 600 Name		Dietary needs/restrictions of any of the registrants (provide name):
Children Registration Ages 12 to 18 Registration fee includes all of the above excluding the MCLE Program. \$250 Name(s) and Age Name(s) and Age			PAYMENT INFORMATION See p. 5 for cancellation policy. ☐ Check or Money order enclosed. (Make checks payable to New York State Bar Association)
Name(s) and Age			☐ Charge \$ to: ☐ American Express ☐ Discover ☐ MasterCard ☐ Visa
			Card numberExpiration Date
t the Hilton.] \$325 Name and Age			Expiration Date
Name and Age			Authorized Signature
Name and Age_			FAV FMAIL OR MAIL THE FORM WITH FFF(S) TO
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Lisa Bataille, Chief Section Liaison

New York State Bar Association, One Elk Street, Albany, NY 12207 lbataille@nysba.org Fax: 518.463.5993 Phone: 518.487.5680

Dietary needs/restrictions of any of the registrants

(provide name):