

NEW YORK STATE BAR ASSOCIATION

MEETING REGISTRATION FORM

Please complete BOTH SIDES of form:

PERSONAL INFORMATION

Name of Attorney _____

Name of Spouse or Guest _____

(Note: all attendees must be over 21 years of age)

Office _____

Address _____

City/State/Zip _____

E-mail Address _____

Phone (____) _____ Fax (____) _____

FRIDAY

Fee includes MCLE program and materials (including "SHELLSHOCKED" video screening), reception, and transportation to/from hotel (if requested).

Number Attending:

SHELLSHOCKED MCLE Program _____

Seafood Reception _____

Shuttle to/from Hotel _____

COST:

Member * \$25 _____

Non-Member Attorney \$45 _____

Law Student \$15 _____

Non-Attorney Guest \$25 _____

Friday Total: \$ _____

SATURDAY

Fee includes breakfast, wine tastings, dinner, and bus transportation.

Lunch and shopping are on your own.

COST:

Member * \$90 _____

Non-Member Attorney \$130 _____

Law Student \$45 _____

Non-Attorney Guest \$100 _____

Optional: Rock-a-Fellers cigars at dinner \$30 _____

Saturday Total: \$ _____

*Member of the NYSBA General Practice or Environmental Law Sections, or a member of the Suffolk County Bar Association (membership status to be verified).

ADDITIONAL REGISTRATION INFORMATION ON REVERSE

General Practice Section

A Long Island Spring Weekend

April 24-26, 2015

Riverhead, NY

HOTEL RESERVATIONS

Hotel Indigo East End

1830 Route 25

Riverhead, New York 11901

Cost: \$159/night

Reserve by March 30th to guarantee rate

Check-in time: 3:00pm

Check-out time: 11:00am

Attendees must make hotel reservations directly by calling (631) 369-2200. Please identify yourself as being part of the NYSBA group. The room rate is guaranteed through March 30, 2015, then is subject to availability of space and prevailing guest room rate. A valid credit card will be requested at time of reservation.

ROOM CANCELLATION: Individual reservations must be cancelled 24 hours prior to the arrival date. If reservations are not cancelled, there will be a non-refundable charge of room and tax for one night.

ADDITIONAL INFORMATION: There are a maximum number of four people in each guest room. Only registered guests are allowed in the room. If there are more than 2 complaints regarding excessive noise or guest disturbances caused by anyone occupying your block you will forfeit your right to occupy the room/rooms. There will be no refunds or discounts if this occurs. All rooms are subject to inspection by management prior to check out. This policy has been established to guarantee guests a peaceful and safe stay.

BILLING ARRANGEMENTS: Individual attendees will pay all charges (cash-paying guests may be asked to leave a cash or credit card deposit to guarantee payment).



NEW YORK STATE BAR ASSOCIATION

PAYMENT INFORMATION

☐ Check or money order enclosed in the amount of \$ _____
(Make checks payable to New York State Bar Association.)

☐ Charge \$ _____ to ☐ American Express ☐ Discover
☐ MasterCard ☐ Visa

Expiration Date: _____

Card number: _____

Authorized Signature _____

General Practice Section

A Long Island Spring Weekend
April 24-26, 2015
Riverhead, NY

IMPORTANT INFORMATION

Cancellations: Notice of cancellation must be received by Noon on April 17 for a refund.

Accommodations for person with disabilities: NYSBA welcomes participation by individuals with disabilities. NYSBA is committed to complying with all applicable laws that prohibit discrimination against individuals on the basis of disability in the full and equal enjoyment of its goods, services, programs, activities, facilities, privileges, advantages, or accommodations. To request auxiliary aids or services or if you have any questions regarding accessibility, please contact Stephanie Bugos at (518) 487-5524.

For Public Officials: The New York State Bar Association is registered with the New York State Joint Commission on Public Ethics pursuant to the Lobbying Act to engage in lobbying activities. Consequently, public officials cannot accept certain benefits from the Association. Further information can be obtained by contacting an official's agency ethics officer or the Association at (518) 463-3200.

MAIL OR FAX THIS FORM TO:

New York State Bar Association
Attn: Kathy Plog
One Elk Street,
Albany, NY 12207
Phone: (518) 487-5681
Fax (secure): (518) 463-5993

QUESTIONS?

Email GeneralPractice@nysba.org
or call Kathy Plog at (518) 487-5681.

