

MEETING REGISTRATION FORM

PERSONAL INFORMATION

Name(s) _____

Firm _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Fax (_____) _____

Email _____

FEES

Health Law Section Member Fee: \$195.00 _____

Admitted to Practice 5 years or Less: \$ 95.00 _____

I'd like to join the Section for \$30 and register at the Section member rate. \$30.00 _____

NYSBA Member Fee: \$240.00 _____

Admitted to Practice 5 years or Less: \$140.00 _____

Non-NYBSA Member Fee: \$295.00 _____

Admitted to Practice 5 years or Less: \$260.00 _____

NYSBA Member Law Students: FREE _____

Non-NYSBA Member New York Law Students:

Join NYSBA FREE at: nysba.org/pathway

(Registration Fee includes breakfast, luncheon, programming and costs associated with program materials.)

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 _____

Health Law Section Fall Meeting

October 27, 2017

State Bar Center
One Elk Street
Albany, NY 12207

⬅ Please note any address corrections on the left.

Registration fee includes:

Breakfast, luncheon, programming and costs associated with program materials.

Cancellation Notice:

Notice of cancellation must be received by **October 20, 2017** in order to obtain a refund for registration fees.

Register Online:

www.nysba.org/health

Program Recording:

This program will be recorded. The recording will be available in 60 days at www.nysba.org for purchase and carries CLE credit.

CLE:

This program is accredited for MCLE credit in New York State only. Attorneys seeking credit in other jurisdictions may contact the governing body for CLE in their respective locations for credit application details.

This program offers non-transitional credits which are not suitable for newly admitted attorneys.

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

Section and Meeting Services
Department
One Elk Street
Albany, New York 12207
Phone: 518-487-5682
Fax: 518-463-5993
Attn: Amy Jasiewicz

