

MEETING REGISTRATION FORM

Name(s) _____

Firm _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Fax (_____) _____

Email _____

REGISTRATION FEES

Attorney Registration fee includes CLE programming and associated costs, continental breakfasts Friday and Saturday, coffee breaks, Thursday reception, Friday Aquarium reception and dinner. Attorneys attending for CLE must pay the attorney registration fee.

- Attorney Fees** \$475 ELSN Section Member
 \$350 ELSN Section Member First Time Attendee (Summer/Fall Mtg)
 \$350 NYSBA Newly Admitted Attorney (5 years or less)
 \$675 NYSBA Member
 \$800 Non-NYSBA Member

Spouse/Guest/Children 18 & Older - Registration fee includes all of the above excluding the MCLE Program. *Guests must be registered to attend events and food functions.*

- \$300 **Name(s)** _____

Children Age 14 to 17 - Registration fee includes all of the above excluding the MCLE Program.

- \$125 **Name(s) and Age(s)** _____

Children Age 7 to 13

- \$50 **Name(s) and Age(s)** _____

Children Under Age 7:

- Free **Name(s) and Age(s)** _____

Dietary needs/restrictions/allergies of any of the registrants and their name(s): _____

ACTIVITIES

THURSDAY WELCOME RECEPTION: HARBORVIEW BALLROOM

6:00 p.m. Registered Number attending: _____

FRIDAY HISTORIC PUB CRAWL

2 p.m. \$43 per person. Please include fee(s). Must be 21 or older.

Registered Number Attending: _____

FRIDAY ISABELLA STEWART GARDNER MUSEUM TOUR, 25 EVANS WAY

2:30 p.m. \$35 per person. Please include fee(s).

Group will meet in Lobby of New Museum Entrance for Tour.

Registered Number Attending: _____

FRIDAY BEHIND THE SCENES TOUR OF FENWAY PARK, 4 JERSEY STREET

2:30 p.m. \$22.00 per person. Please include fee(s).

Group will meet at Gate D for Tour.

Registered Number Attending: _____

FRIDAY RECEPTION & DINNER: NEW ENGLAND AQUARIUM

6:30 p.m.

Registered Number Adults: _____ Number Children: _____

*Vegetarian Meals on Request. Please Note under Dietary Needs Area.

Elder Law & Special Needs Section Summer Meeting

July 18-20, 2019

HOTEL INFORMATION/RESERVATIONS:

Boston Marriott Long Wharf

296 State Street
 Boston, Massachusetts

Book your Lodging via the Hotel Reservation Link, before June 27, at: **www.nysba.org/ELDSU19** to receive our preferred rate.

Hotel Rates:

\$349 Standard King Room plus local & state taxes. Limited Double/Double rooms available (call 518-487-5573 if needed). Rates include use of 24 hour fitness center and indoor pool. Check in is 4 pm; Check out is 11 am. Onsite valet parking available for vehicles less than 6 feet 7 inches tall for a fee.

Hotel reservation deadline:

JUNE 27, 2019.

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

Please return this form with appropriate payment of fee(s) to:

Catheryn S. Teeter | Sections & Meeting Liaison
 New York State Bar Association
 One Elk Street, Albany, New York 12207
 Telephone: (518) 487-5573
 Fax: (518) 463-5993
 cteeter@nysba.org

CANCELLATION POLICY:

Cancellations must be received prior to July 8, 2019 to receive a full refund of registration fees.