NEW YORK STATE BAR ASSOCIATION

ANNUAL MEETING 2016 TABLE RESERVATION FORM TABLE SEATS 10 PEOPLE / COST IS \$675.00 PER TABLE

FAMILY LAW SECTION
RECEPTION AND LUNCHEON
Thursday, January 28, 2016
12:00 p.m. - 2:00 p.m.
New York Hilton Midtown
1335 Avenue of the Americas
Grand Ballroom West, 3rd Floor

NAME (PLEASE PI	UNT)		TELEPHONE NO.
FIRM		_	FACSIMILE NO.
STREET	CITY	ZIP	
E-MAIL ADDRESS			
NUMBER OF TABLES			
	e enclosed in the amount of the to the New York State Bar A		_
□ Charge \$ to □	American Express □ Dis	scover 🗆 Mas	terCard □ Visa
Card number:		Exp	o. date:
Please return to: Adriana Favreau, New Yo One Elk Street, Albany, N fax: 518.463.5993 or e-m			
Refunds will not be issued	unless notice of cancellation	is received before	re January 13, 2016.

NEW THIS YEAR!

WE WILL NOT BE MAILING INDIVIDUAL TICKETS.
PLEASE INFORM YOUR GUESTS TO IDENTIFY THEMSELVES BY
PROVIDING THE FIRM NAME. ASSIGNED TABLE NUMBERS WILL
BE AVAILABLE ONSITE AND IDENTIFIED BY FIRM NAME.

