NEW YORK STATE BAR ASSOCIATION MEETING REGISTRATION FORM **Labor & Employment Law Section** Name of Attorney _____ **Fall Meeting** Nickname/Attorney _____ October 20 - 22, 2017 Name of spouse or guest _____ The Sagamore Resort **Bolton Landing, NY** Nickname/Spouse/Guest ______ Names & Ages of Children _____ Please note any address corrections on the left. Firm/Affilliation Attorney registration fee includes: MCLE Programming and costs Phone _____ Fax _____ associated with programming, all coffee breaks, Friday box E-mail address _____ lunch, Friday reception & dinner, Saturday reception and giveaway. REGISTRATION FEES Check Here if You Are A First Time Attendee **Cancellation Notice:** \$350.00 _____ NYSBA L & E Law Section Member: Notice of cancellation must be NYSBA Member: \$450.00 _____ received by October 10, 2017 \$525.00 _____ Non-Member Attorney: in order to obtain a refund of \$200.00 _____ Spouse/Guest: Age 18 & Over registration fees. Children 12 and older: \$75.00 _____ Children 11 and under: free **HOTEL RESERVATIONS: Book your lodging online** FRIDAY MCLE WORKSHOP CHOICES: by September 18th. Go to Check the workshop you plan to attend. www.nysba.org/LaborFall17 for link to reservation portal. Friday, October 20: ☐ Workshop A ☐ Workshop B ☐ Workshop C ☐ Workshop D **ACTIVITIES** Fax or Mail this form with FRIDAY, OCTOBER 20 registration fee(s) to: **Box Lunch** Catheryn S. Teeter Registered attorney requesting box lunch. Meetings Representative Number of Additional Box Lunches for Spouse/Guest/Children. New York State Bar Association Please include \$33.00 per additional box lunch requested with One Elk Street registration fees. Albany, New York 12207 Cocktail Reception & Dinner - 6:00 pm to 9:30 pm Telephone: 518.487.5573 Yes, registered attorney will attend. Fax: 518.463.5993 Yes, registered spouse/quest/child will attend (number attending) PAYMENT INFORMATION Preferred entree: Fish______ Beef___ Children's Meal ___ ☐ Check or Money order enclosed in the Please specify number of each type entree requested. amount of \$ Make checks payable to New York State **SATURDAY, OCTOBER 21** Bar Association. Golf at the Sagamore Golf Course - 1:00 pm ☐ Charge \$ _____ to Fee includes Cart, Greens Fees and Box Lunch: ☐ American Express ☐ Discover \$150.00 per person per round Please include with registration fees. ☐ MasterCard ☐ Visa Handicap(s) _ __ Handicap(s) __ Player____ Card Number Morgan Boat Cruise - 1:30 pm Expiration date ____

Free to registrants staying at the Sagamore. Limited Tickets.

Yes, registered spouse/quest/child will attend (number attending)

Cocktail Reception - 6:30 pm to 7:30 pm Yes, registered attorney will attend.

____ Number of people

Authorized Signature