

NEW YORK STATE BAR ASSOCIATION

Environmental & Energy Law Section Fall Meeting – Registration Form

OCTOBER 19-21, 2018 | Emerson Resort & Spa | Mount Tremper, NY

Name: _____ Email: _____ Phone: _____

Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

REGISTRATION FEES

Registration fee includes Friday's MCLE program, beverage refreshment break and cocktail reception and dinner, Saturday's MCLE program, beverage refreshment break, and cocktail reception and dinner.

Attorney Registration Fees

- ☐ \$150 1st Time NYSBA Section Attendee
- ☐ \$150 NYSBA Newly Admitted Attorney (5 years or less)
- ☐ \$235 NYSBA Member
- ☐ \$335 Non-NYSBA Member

Spouse/Guest Registration - Registration fee includes all of the above excluding the MCLE Program.

☐ \$125 Name _____

Children Registration Ages 12 to 18 - Registration fee includes all of the above excluding the MCLE Program.

☐ \$50 Name(s) and Age _____
Name(s) and Age _____

Children Registration Ages 7 to 11 - Registration fee includes all of the above excluding the MCLE Program.

☐ \$30 Name and Age _____
Name and Age _____
Name and Age _____

Children Under Age 7 – no charge.

Name and Age _____
Name and Age _____
Name and Age _____

Dietary needs/restrictions of any of the registrants (provide name):

SOCIAL EVENTS

Cocktail Reception/Dinner at Emerson Resort & Spa:

Friday, October 19 ____ (No. of ppl) attending

Cocktail Reception at Emerson Resort & Spa:

Saturday, October 20 ____ (No. of ppl) attending

BOOK YOUR OWN HOTEL ACCOMMODATIONS

Call Emerson Resort & Spa at 845.688.4141 or e-mail marcilene.smith@gmail.com to book your room. Identify yourself as attending the New York State Bar Association Environmental and Energy Law Section Fall Meeting. Rooms are \$199 per night plus taxes.

Reservation Deadline:
September 19, 2018

PAYMENT INFORMATION

See reverse for cancellation policy.

☐ Check or Money order enclosed. (Make checks payable to New York State Bar Association)

☐ Charge \$ _____ to:
☐ American Express ☐ Discover
☐ MasterCard ☐ Visa
Card number: _____

Expiration date: _____

Authorized Signature: _____

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

Lori Nicoll, Meeting Representative
New York State Bar Association
One Elk Street, Albany
New York 12207
Phone: 518.487.5563
Fax: 518.463.5993
Email: lnicoll@nysba.org

