IN .	E VV	YOKK	SIAI	E BAK	A 5 5 0	JCIAIION
ANNUAL MEETING 2020 TABLE RESERVATION FORM TABLE SEATS 10 PEOPLE / COST: \$750.00 PER TABLE						
FAMILY LAW SECTION RECEPTION AND LUNCHEON Thursday, January 30, 2020 12:00 p.m 2:00 p.m. (This Year's Entree will not be Fish) New York Hilton Midtown 1335 Avenue of the Americas Grand Ballroom West, 3rd Floor						
NAME	AE (PLEASE PRINT)				TELEPHONE NO.	
FIRM NAME AS IT SHOULD APPEAR ON TABLE SIGN						FACSIMILE NO.
STREET			CITY		ZIP	
E-MAIL ADDRE	SS					
NUMBER OF TA	ABLES					
□ Check or money order enclosed in the amount of \$ (Please make checks payable to the New York State Bar Association)						
□ Charge \$ to □ American Express □ Discover □ MasterCard □ Visa						
Card number:					Exp. date:	
Please return te Catheryn Teete One Elk Street, fax: 518.463.59	r, New Albany	; NY 12207	7			
Refunds will no	ot be is	ued unless	notice of ca	ncellation is	received b	efore January 10, 2020.
	PLEASE REMEMBER:					
	WE WILL NOT BE MAILING INDIVIDUAL TICKETS. Please inform your guests to identify themselves by Providing the firm name. Assigned tables will be					

IDENTIFIED BY FIRM NAME AT THE LUNCHEON.

