

REGISTRATION FORM
THIRTEENTH ANNUAL STATEWIDE ETHICS SYMPOSIUM

Presented by
The State Bar of California Committee on
Professional Responsibility and Conduct

Saturday, May 2, 2009

Note: One Registrant per form. Photocopies may be used.

State Bar Number _____

Name _____

Firm _____

Address _____

City, State _____ Zip Code _____

Phone _____

Fax _____

E-Mail _____

Required for email confirmation

Your Name and Address may be disclosed.

Check here if you do not want your information released.

REGISTRATION FEES (Check the appropriate box)

- \$125 Program Package includes: 6 hours of MCLE credit, resource book, and lunch
- Student Fee: \$50 Program Package includes: resource book and lunch
- Free of charge: No MCLE credit, resource book or lunch (registration for free attendance is offered on a space available basis) MAIL OR FAX FORM ONLY.

CREDIT CARD INFORMATION

I authorize the State Bar of California to charge my program registration to my Visa/MasterCard account. (No other credit card will be accepted.)

Account Number _____ Exp Date _____

VISA or MasterCard Only

Cardholder's Name _____

Cardholder's Signature _____

PRE-REGISTRATION DEADLINE In order to pre-register, your form and check, payable to the State Bar of California, or credit card information, must be received by **April 24, 2009**. Please register early as space is limited.

REGISTER ONLINE at www.calbar.org/ethics-symposium.

MAIL TO Program Registrations, State Bar of California, 180 Howard Street, San Francisco, CA 94105.

FAX TO Program Registration at 415.538.2368. In order to fax your registration credit card information is MANDATORY. (Photocopies of checks will not be accepted).

CANCELLATION/REFUND POLICY All requests for refunds must be received in writing no later than April 24th. Refunds will not be made for requests received after April 27, 2009.