

Registration Form

Name (First, MI, Last)

Nametag Name

Spouse Nametag Name (if attending)

Child 1 Name (if attending) Age

Child 2 Name (if attending) Age

Child 3 Name (if attending) Age

Child 4 Name (if attending) Age

Organization / Employer Title

Address

City / State / Zip

Day Phone Fax Mobile

CLS Chapter

Email

Law School Year of Graduation

CLS National Conference Registration	Early Rate Before July 31	Advance Rate Before Sept 15	Full Price after Sept 15	Amount X # of Persons
CLS Attorney Member Registration	\$495	\$595	\$695	
CLS Non-Attorney Member Registration	\$400	\$450	\$500	
Spouse Registration	\$200	\$200	\$200	
CLS Student Member Registration	\$125	\$125	\$125	
Student Spouse Registration	\$125	\$125	\$125	
CLS Non-Member Registration	\$695	\$795	\$895	
Name Your Own Rate Alternative	\$250+	\$250+	\$250+	
We understand that economic hardships may make it difficult for some to attend this conference at the full rate. CLS desires participation more than registration fees. If you cannot afford these rates, please write in your amount, \$250 or more				
Childcare & Kids Conference				
Child Meals (13-18)	\$150	\$150	\$150	
Child Meals (4-12)	\$70	\$70	\$70	
Child Meals (0-3)	FREE	FREE	FREE	
Childcare (11 and under)	FREE	\$100	\$200	
Optional Add-ons				
Pre-Conference Seminar - Estate Planning	\$75	\$75	\$75	
Pre-Conference Seminar - Living & Telling	\$75	\$75	\$75	
Scholar Symposium Luncheon (Attorney)	\$45	\$45	\$45	
Friday Sunset Dinner Cruise	\$45	\$45	\$45	
Thursday Aquarium Excursion - Adult	\$35	\$35	\$35	
Thursday Aquarium Excursion - Child (2-18)	\$25	\$25	\$25	
A La Carte Items				
Pre-Conference Seminar - Estate Planning	\$95	\$95	\$95	
Pre-Conference Seminar - Living & Telling	\$95	\$95	\$95	
Saturday Banquet Only	\$95	\$95	\$95	
TOTAL				



8001 Braddock Road, Ste 302
 Springfield, VA 22151
 855.257.9800 | Fax 855.257.9801

www.clsnet.org | clshq@clsnet.org

Please register online or mail this form in with your fees.
 If paying by credit card, you may register online or fax to CLS - 855.257.9801

Payment Method: Check Visa Mastercard Amex Discover

Name on Card _____

Card No. _____ Expiration Date _____

Signature _____