

DEPOSITIONS *Unveiled*

Unlocking the Secrets for Success

GENERAL INFORMATION

☐ Judge Bar Roll Number _____

☐ Ms. ☐ Mr. Name _____

First Name for Badge _____

Firm Name _____

Address _____

City/State/Zip _____

Office Phone _____ Home Phone _____

Fax _____

☐ Please check here or contact the LSBA if you have a disability which may require special accommodations at this conference.
The LSBA is committed to ensuring full accessibility for all registrants.

☐ Advanced Registration - **\$350** ☐ Flash Drive - **\$25**

☐ Registration After March 29 - **\$375** ☐ Printed Manual - **\$40**

SEMINAR PAYMENT

☐ **Pay by Check:** Make checks payable to the Louisiana State Bar Association.

☐ **Pay by Credit Card:** Please charge \$_____ to my credit card ☐ VISA ☐ MC ☐ Discover

Last four (4) digits of credit card _____

Name as it Appears on Card _____

Billing Address on Card _____

City/State/Zip _____

Signature _____

CREDIT CARD INFO

The credit card information below will be destroyed after your credit card has been charged:

CLE REGISTRATION

Please charge \$_____ to my credit card ☐ VISA ☐ MC ☐ Discover

Credit Card Account Number _____

Expiration _____ Security Code _____

**The LSBA will no longer accept registration forms with credit card information via email.
Registration forms may be mailed or faxed.**

Please return this form with your remittance to:

Seminar Registration - Louisiana State Bar Association, 601 St. Charles Ave., New Orleans, LA 70130-3404

Questions? Please call (504)619-0102 (800)421-5722, ext. 102 • fax (504)617-7050