



## Attorney Registration Form

Judge Bar Roll Number \_\_\_\_\_

Ms.  Mr. Name \_\_\_\_\_

First Name for Badge \_\_\_\_\_

Firm / Company \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Office Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

Check here or contact the LSBA if you have a disability, dietary restrictions or a food allergy which may require special accommodations at this conference. The LSBA is committed to ensuring full accessibility for all registrants.

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**Cancellation Policy:** All cancellations must be received in writing and sent to [diversity@lsba.org](mailto:diversity@lsba.org). Telephone cancellations will not be accepted. Cancellations received in writing before **December 1, 2017** will be fully refunded minus a \$10.00 administrative fee. If written confirmation of cancellation is not received by December 1, 2017, no refunds or credits will be issued of any kind. Credits will be processed within two weeks of receipt of the cancellation request.

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**Registration fee: \$55.00**

Pay by Check: Make check payable to the Louisiana State Bar Association.

Amount Enclosed \_\_\_\_\_

To register and pay by credit card (Visa or MC), please visit our website, [www.lsba.org/CLE/](http://www.lsba.org/CLE/).

**6.00 hours of CLE credits**  
**Including 1 hour of Ethics, 1 hour of Professionalism, and 1 hour of Law Office Management**

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Please return this form with payment to:  
Louisiana State Bar Association  
Attn: Member Outreach and Diversity  
601 St. Charles Ave., New Orleans, LA 70130