

LSBA MEMBER OUTREACH & DIVERSITY DEPARTMENT

Serving the Public. Serving the Profession.

Diversity • Inclusion • Professionalism

Date

Location _____

Registration Fee

Time ____

NON-ATTORNEY REGISTRATION

Prefix (Ms./Mr./etc)	First Name for I	3adge	
Name			
Job Title			
City/State/Zip			
Office Phone			
☐ Registration fee \$	Registration Deadline		
Registration by check: Make check payable to Louisiana State Bar Association.			
	Payment Amount	Check Number	

Please complete this form and return with payment (make check payable to "Louisiana State Bar Association") to:

Department of Member Outreach and Diversity Louisiana State Bar Association 601 St. Charles Ave. New Orleans, LA 70130-3404

Questions? Email: diversity@lsba.org • (504)619-0115