



The Florida Bar Entertainment, Arts & Sports Law Section Presents

**A Day in the Life of Dolphins In-House Counsel: Sponsorship Agreements, Vendor Agreements, Trademarks, Collective Bargaining Agreements, Special Events, Entertainment and more!
(Reference No. 1406059N)**

Sun Life Stadium, Miccosukee Room
2269 NW 199th St, Miami Gardens, FL 33056
(305) 943-8000, www.sunlifestadium.com

Sunday, September 21, 2014

1:00 p.m. – 2:15 p.m.

A Day in the Life of Dolphins In-House Counsel: Sponsorship Agreements, Vendor Agreements, Trademarks, Collective Bargaining Agreements, Special Events, Entertainment and more!

Adam Zissman, Miami Dolphins General Counsel, Miami

Additional Speakers TBD

2:15 p.m. – 4:25 p.m.

Tailgate at Your Leisure (Feel free to bring your favorite food and drink)

4:25 p.m.

Miami Dolphins vs. Kansas City Chiefs

CLE CREDITS

General: 1.5 hours

Ethics: 0.5 hour

CERTIFICATION PROGRAM

(Maximum Credit: 1.0 hour)

Business Litigation: 1.0 hour

REGISTRATION DEADLINE: AUGUST 19, 2014

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REGISTRATION DEADLINE: AUGUST 19, 2014

REGISTRATION FEE (check one):

- | | | |
|--------------------------|--------------------|----------------------------|
| <input type="checkbox"/> | CLE Only: | \$35 (#8070056) |
| <input type="checkbox"/> | Game Ticket Only: | \$60 (#8070057) |
| <input type="checkbox"/> | CLE & Game Ticket: | \$95 (#8070056 & #8070057) |

To Register, please fill out the attached form and mail to Angie Froelich, EASL Section, The Florida Bar, 651 E. Jefferson Street, Tallahassee, FL 32399-2300 (afroelich@flabar.org) or fax to (850) 561-9413 (secure fax). For questions, contact Charlotte Towne at (954) 306-6624 or legal@charlottetownelaw.com.

Name: _____

Bar Number: _____

Address: _____

City/Zip: _____

Phone: _____ Email: _____

Please check here if you have a disability that may require special attention or services. To ensure availability of appropriate accommodations, attach a general description of your needs. We will contact you for further coordination.

METHOD OF PAYMENT (check one):

- Check enclosed made payable to The Florida Bar
- Credit Card: MASTERCARD VISA DISCOVER AMEX
Exp. Date: ____/____ (MO./YR.)

Signature: _____

Name on Card: _____

Billing Zip Code: _____

Card No.: _____