

29th NORTH AMERICAN LAW CONFERENCE
 November 8th-12th, 2017 • San Juan, Puerto Rico • Ritz-Carlton Resort
REGISTRATION FORM

ATTENDEE FIRST AND LAST NAME: _____

GUEST FIRST AND LAST NAME: _____

LAW FIRM NAME: _____

Mailing address business or home (credit card billing address is required below)

STREET: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____

EMAIL: _____

WOULD YOU LIKE TRAVEL INSURANCE? YES NO

PLEASE INDICATE YOUR DESIRED BED TYPE? KING 2-DOUBLE BEDS
(Every effort will be made to accommodate your preference.)

T-SHIRT SIZE: EXTRA SMALL | SMALL | MEDIUM | LARGE | XL | 2X
(Please circle one)



Travel at the speed of change®

NOTE: Travel insurance including cancellation coverage is available by contacting Jane Mulbah
[\(404\)974-4893](tel:4049744893) or jmulbah@dt.com



ALL-INCLUSIVE LAND PACKAGE PRICING ONLY. CLE registration is NOT included below.

PRICING:	PAYMENT RECEIVED BY AUGUST 11, 2017*	
	Single-occupancy	Double Occupancy
4 NIGHTS		
City View Room	\$1,132	\$1,338
Pool View Room	\$1,215	\$1,421
Ocean View Room	\$1,360	\$1,568
OV Room w/ Balcony	\$1,544	\$1,665
City View Room [Club Level]	\$1,787	\$1,995
Pool View Room [Club Level]	\$1,926	\$2,136 <i>Already Sold out</i>
City View Junior Suite	\$2,125	\$2,333
Pool View Junior Suite	\$2,366	\$2,574
Executive Suite	\$2,837	\$3,147
Garden View Suite	\$3,352 <i>Already Sold out</i>	\$3,657 <i>Already Sold out</i>

CANCELLATION POLICY:
 THERE WILL BE NO REFUND ON CANCELLATIONS RECEIVED AFTER September 11th, 2017. Cancellations received prior to September 11th, 2017 will be assessed a \$150 administrative fee. Cancellations must be submitted in writing to Direct Travel.

SEPARATE CLE REGISTRATION:
 Attendees must also complete the CLE educational component registration form to register for the conference.

ADD'L INFO:
 The group rates apply 3 days prior to the conference and 3 days post conference at Ritz-Carlton San Juan.

GIT has discounted fares for the conference on Delta, American and United Airlines.

*After August 11, 2017 Late Registration fee will apply. All Rates increase by \$150 after August 11, 2017.

A \$1,000 social fee will be charged to anyone not booking with Direct Travel.

TOTAL PACKAGE AMOUNT: \$ _____

CREDIT CARD TYPE, NUMBER: _____ EXP: _____ CVV: _____

NAME: _____ SIGNATURE: _____

(In lieu of original signature) By sending this email I acknowledge I have read all of the information on the brochure including the cancellation policy and authorize Direct Travel to charge my card in the amount indicated above and accept this form in lieu of my signature.

BILLING ADDRESS (for the card if different from the mailing address): _____

Any questions about the travel package, please contact Jane Mulbah, DirecTravel, 404 974-4893 or email jmulbah@dt.com or Darryl Cohen at 404-814-0000 ext. 4 or by email at dcohen@coco-law.tv.