

Pre-Registration/ Ticket Fee FORM

Early Bird Registration Deadline: August 13, 2014
Pre-Registration Deadline: August 21, 2014

Pre-registration is required for ticketed events and hotel reservations. Use reverse side of this form for your education course selections. For program registration information call 415-538-2508. For special assistance please call 415-538-2210, or email AnnualMeeting@calbar.ca.gov.

Keep A Copy For Your Records

HOW TO REGISTER

Complete steps 1, 2 & 3 and file pre-registration/ticket form online, fax or mail.

Online www.calbar.ca.gov/annualmeeting

Fax Send Pre-registration Form/Course Selector to:
415-538-2368.

If sending by fax, do not mail original form. Faxed registration must include credit card payment and cannot be confirmed by telephone.

Mail Send Pre-registration Form/Course Selector to:
2014 Annual Meeting Pre-registration
The State Bar of California
180 Howard Street
San Francisco CA 94105-1639

STEP ONE

Bar# _____

First & Last Name _____

Firm _____

Address _____

City, State, Zip _____

Phone _____

Email(required for email confirmation) _____

Check here if you do not want your name and address disclosed to other 2014 Annual Meeting attendees, exhibitors/vendors.

Your response to the following questions will aid us in planning the Annual Meeting.

Primary Practice Area: _____

Firm/Practice Size: 1-5 attys 6-50 attys 51+ attys

**Complimentary to Annual Meeting Registrants (up to \$95 value).
Select One State Bar Section Membership (valid August 2 through
December 31, 2014)** (For information about a State Bar Section
visit www.calbar.org/sections).

- | | | |
|---|---|--|
| <input type="checkbox"/> Antitrust & Unfair
Comp. | <input type="checkbox"/> Intellectual Property | <input type="checkbox"/> Public Law |
| <input type="checkbox"/> Business | <input type="checkbox"/> International | <input type="checkbox"/> Real Property |
| <input type="checkbox"/> Criminal | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Solo and Small Firm |
| <input type="checkbox"/> Environmental <input type="checkbox"/>
Family | <input type="checkbox"/> Law Practice Mgmt
& Tech. | <input type="checkbox"/> Taxation |
| | <input type="checkbox"/> Litigation | <input type="checkbox"/> Trust and Estates |
| | | <input type="checkbox"/> Workers' Comp. |

STEP TWO

REGISTRATION FEES (Select only one fee from either Option A or B)

OPTION A. FULL REGISTRATION PASS

	Through Aug. 13	Aug. 14-21 & Onsite
<input type="checkbox"/> Attorneys licensed before 9/1/09	\$475	\$575
<input type="checkbox"/> Attorneys licensed on or after 9/1/09	\$355	\$455
<input type="checkbox"/> Other (non-attorney Bar association staff/ paralegal legal secretary/office administrator /law student)	\$355	\$455

OPTION B. 2-DAY REGISTRATION PASS

Education Courses/Activities on Select Days
No other 2-day pass options are available.

	Through Aug. 13	Aug. 14-21 & Onsite
<input type="checkbox"/> Thursday/Friday Only Pass	\$325	\$425
<input type="checkbox"/> Saturday/Sunday Only Pass	\$325	\$425

Subtotal for registration fees: \$ _____

EVENT FEES will not be accepted without pre-registration fee.

	#	Cost	Total
Thursday, September 11, 2014			
[145] State Bar Luncheon	_____	@ \$49	\$ _____
[146] Opening Night Reception	_____	(# in party)	FREE
[147] California Women Lawyers Reception/Dinner	_____	@ \$135	\$ _____

Friday, September 12, 2014

[148] Sign up for Friday General Session on the Course Selector			
[149] President's Reception USS Midway Museum-Adults	_____	@ \$85	\$ _____
[150] Children (6-12)	_____	@ \$45	\$ _____

Saturday, September 13, 2014

[151] State Bar Breakfast	_____	@ \$35	\$ _____
[152] State Bar Luncheon & Morrison Address	_____	@ \$49	\$ _____

Subtotal from above event fees: \$ _____

**Total Registration & Ticket Event Fees
enclosed or to be charged:** \$ _____

STEP THREE

Make check payable to The State Bar of California. Paying by credit card?
Fax registration form to 415-538-2368.

I authorize the State Bar of California to charge my Annual Meeting fees to my
MasterCard or VISA account. (No other credit cards will be accepted.)

MasterCard VISA

Account # _____

Exp. Date _____

Cardholder's Name _____

(print as it appears on card)

Cardholder's Signature _____

COURSE SELECTOR

Name _____

Bar # _____

Circle the number of the program you wish to attend. Select only ONE in each time slot.

THURSDAY – SEP. 11	PROGRAM NUMBER
11:00 am – 12:00 noon	1 2 3 4 5 6 7 8 9 10 11
2:30 pm – 4:00 pm	12 13 14 15 16 17 18 19 20 21
4:15 pm – 5:15 pm	22 23 24 25 26 27 28 29 30 31, 86
FRIDAY – SEP. 12	PROGRAM NUMBER
8:00 am – 9:30 am Doors open at 7:15 am	148 (General Session) Ticket Required for Admission.
10:00 am – 11:00 am	32 33 34 35 36 37 38 39 40 41 42 43
11:15 am – 12:15 pm	44 45 46 47 48 49 50 51 52 53 54, 95
2:15 pm – 3:45 pm	55 56 57 58 59 60 61 62 63 64 65 66
4:00 pm – 5:00 pm	67 68 69 70 71 72 73 74 75 76 77 78
SATURDAY – SEP. 13	PROGRAM NUMBER
8:00 am – 9:00 am	79 80 81 82 83 84 85 87 88
9:15 am – 10:15 am	89 90 91 92 93 94 96 97 98
10:30 am – 12:00 noon	99 100 101 102 103 104 105 106 107 108 109
2:15 pm – 3:45 pm	110 111 112 113 114 115 116 117 118 119
4:00 pm -5:00 pm	Exhibit Hall Presentation by Stephen Fairley, The Rainmaker Institute (No MCLE) Advance sign-up not is not required.
SUNDAY – SEP. 14	PROGRAM NUMBER
8:00 am – 9:00 am	120 121 122 123 124 125 126 127
9:15 am – 10:15 am	128 129 130 131 132 133 134 135
10:30 am – 12:00 noon	136 137 138 139 140 141 142 143