

# Registration Form

In our continuing effort to keep costs at a minimum, we do not send confirmations. Please assume we have received your registration form and check in at the Registration Table upon arrival at the Hotel.

**Registration Forms must be postmarked by Friday, February 13, 2009. Registrations received with a postmark later than February 13, 2009, will be handled as a LATE REGISTRATION AND PROCESSED AT THE DOOR.**

I have read the cancellation policy and wish to attend the TALI Mid-Winter Conference in Irving, Texas, on February 27-28, 2009.

(Please print and please fill in all information.)

Name \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

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

Business Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

## REGISTRATION FEE: (Please note that GUESTS do NOT receive CE Credit)

\_\_\_\_\_ \$ 199 TALI or NALI Member - full conf - (12-hrs CE) (Friday —  Civil Process -OR-  Alt CE) .... \$ \_\_\_\_\_

\_\_\_\_\_ \$ 95 TALI or NALI Member - 1 day only -  Friday ONLY Alt CE -OR-  Saturday ONLY ..... \$ \_\_\_\_\_

\_\_\_\_\_ \$ 249 Non-Member - full conference - (12-hrs CE) (Friday —  Civil Process -OR-  Alt CE) ..... \$ \_\_\_\_\_

\_\_\_\_\_ \$ 145 Non-Member - 1 day only -  Friday ONLY Alt CE -OR-  Saturday ONLY ..... \$ \_\_\_\_\_

\_\_\_\_\_ \$ 125 Member or Non-Member - **CIVIL PROCESS CLASS ONLY** ..... \$ \_\_\_\_\_

\_\_\_\_\_ \$ 75 Spouse/Guest ..... \$ \_\_\_\_\_

\_\_\_\_\_ Number of Persons attending

**Total Amount enclosed or to be charged to credit card ..... \$ \_\_\_\_\_**

### \*\*\* LATE REGISTRATION FEES\*\*\*

Members — full conference \$225 — 1 day only (NOT Civil Process) \$120

Non-Members — full conference \$275 — 1 day only (NOT Civil Process) \$145

**FULL CONFERENCE REGISTRATION FEE COVERS:** Tuition; CE Proof of Attendance; all hand-out materials; Continental Breakfast (Friday & Saturday); buffet lunch (Saturday only); Vendor Reception (Friday evening); and beverages.

**2 maximum per registration form — Please list all names registered with this form (PRINT CLEARLY—this is the information used to make the name tags and prepare CE Forms!). Please mark the proper membership designation (Member, Non-Member, Guest), and you MUST provide a State License Number for EACH person who will receive CE Credit!!**

1. \_\_\_\_\_  TALI Member  NALI Member  Non-Member  Guest

Individual's e-mail address \_\_\_\_\_

State License Number \_\_\_\_\_

2. \_\_\_\_\_  TALI Member  NALI Member  Non-Member  Guest

Individual's e-mail address \_\_\_\_\_

State License Number \_\_\_\_\_

**If paying by credit card, please complete the following. All information is required. Incomplete information will result in your registration form being returned to you.**

Card type:  MasterCard  VISA  AMEX  Discover Amount Charged—\$ \_\_\_\_\_

Is this a debit card?  Yes  No

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_ (month and year — 00/0000)

3 or 4 digit security code: \_\_\_\_\_

Name exactly as it appears on the Card: \_\_\_\_\_

Billing Address including city, state, zip: \_\_\_\_\_

Signature: \_\_\_\_\_ (charge invalid if not signed)

**Mail to TALI, PO Box 670344, Dallas, TX 75367-0344; or fax toll-free to 877-445-TALI.**