

2008 spring meeting registration form

wednesday, may 14, 2008 – friday, may 16, 2008

interContinental hotel - houston • houston, tx

cancellation deadline: no refund of any fee or credit will be given for cancellations after May 5, 2008

3 ways to register:
(1) mail:
 AIPLA
 241 18th Street, South
 Suite 700
 Arlington, VA 22202

(2) fax: 703.412.1304
 (Faxed registrations MUST be accompanied by credit card information).

(3) register online:
 Go to www.aipla.org
 Credit Card Payment Only

* to get the member rate, please submit a membership application & payment with this registration. to obtain a membership application, please visit our website at www.aipla.org

member ID: _____

first name: _____ last name: _____

firm/company: _____

mailing address: _____

city/state/zip code: _____

telephone: _____ e-mail: _____

(spouse/guest) name: _____

registration fees

- | | | |
|---|-------|-------------|
| <input type="checkbox"/> AIPLA member register by 4/28/08 and take \$100 off the fee (pay only \$545) | \$645 | \$ _____ |
| <input type="checkbox"/> non-member* register by 4/28/08 take \$100 off the fee (pay only \$855) | \$955 | \$ _____ |
| <input type="checkbox"/> membership drive discount (see member flyer to calculate) | | \$(_____) |
| <input type="checkbox"/> AIPLA student member rate | \$55 | \$ _____ |
| <input type="checkbox"/> government employee/AIPLA academic member rate | \$70 | \$ _____ |
| <input type="checkbox"/> first-time corporate in-house counsel (subject to AIPLA verification) | \$0 | \$ _____ |

event fees

- wednesday, may 14
 - spouse/guest tour with Lunch: "Space Center Houston" \$93 x # _____ \$ _____
 - luncheon speaker: Jon W. Dudas \$46 x # _____ \$ _____
 - opening night reception: "Space City USA featuring an Open Mic" \$65 x # _____ \$ _____
 - thursday, may 15
 - spouse/guest tour with Lunch: "Historic Bayou Bend" \$87 x # _____ \$ _____
 - luncheon speaker: Paul M. Janicke \$44 x # _____ \$ _____
 - dinner: "Denim & Diamonds" \$95 x # _____ \$ _____
 - friday, may 16
 - networking luncheon \$42 x # _____ \$ _____
- food restrictions/request _____ Total Amount \$ _____

For information purposes only, so that we may better allocate room locations, please indicate which Track you may attend.

wednesday, may 14:

- | | |
|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> am track 1 | <input type="checkbox"/> pm track 1 |
| <input type="checkbox"/> am track 2 | <input type="checkbox"/> pm track 2 |
| <input type="checkbox"/> am track 3 | <input type="checkbox"/> pm track 3 |

thursday, may 15:

- | | |
|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> am track 1 | <input type="checkbox"/> pm track 1 |
| <input type="checkbox"/> am track 2 | <input type="checkbox"/> pm track 2 |
| <input type="checkbox"/> am track 3 | <input type="checkbox"/> pm track 3 |

friday, may 16:

- plenary session

method of payment

- check enclosed (make checks payable to AIPLA)
 credit card (please circle one - AMEX, MC, or VISA)

card number _____

exp. date _____

name on card _____

signature _____