



2019 Indiana State Bar Association Annual Meeting Registration

Early Bird registration deadline is Sept. 25, 2019. To register online, please visit www.inbar.org.

FULL CONFERENCE REGISTRATION

	Early Bird	9/26 – 10/11	After 10/11	
ISBA Sustaining Member	\$269	\$294	\$319	\$ _____
ISBA Member	\$299	\$324	\$349	\$ _____
ISBA Member Licensed Less than 5 Years	\$150	\$175	\$175	\$ _____
ISBA Member Judge	\$150	\$175	\$175	\$ _____
ISBA Affiliate Member/Law Student	\$150	\$175	\$175	\$ _____
Non-Member	\$575	\$600	\$625	\$ _____
<i>Full-time registration fee includes: Welcome Reception, Law Expo, Family Feud Lunch, Keynote Dinner, Thursday and Friday break stations, Thursday Night Social and attendance at ANY CLE programs.</i>				
USB Drive (w/program materials): Qty. _____	\$15/ea.	\$15/ea.	N/A	\$ _____
CLE Only* – ISBA Member	\$150	\$150	\$150	\$ _____
CLE Only* – Non-member	\$250	\$250	\$250	\$ _____
*Includes all CLE, does not include meals.				

SINGLE DAY REGISTRATION

THURSDAY, OCT. 17

	Early Bird	9/26 – 10/11	After 10/11	
Thursday Only* – ISBA Member	\$175	\$200	\$225	\$ _____
Thursday Only* – Non-Member	\$275	\$300	\$325	\$ _____
*Includes CLE programming on Thursday as well as Thursday Lunch, Keynote Dinner, Law Expo and Thursday Night Social.				

FRIDAY, OCT. 18

Friday Only* – ISBA Member	\$75	\$75	\$75	\$ _____
Friday Only* – Non-member	\$175	\$175	\$175	\$ _____
*Includes CLE programming on Friday as well as the Law Expo.				

GUEST REGISTRATION

	Early Bird	9/26 – 10/11	After 10/11	
Guest Registration	\$200	\$225	\$250	\$ _____

Guest Registration includes all meals & events.

Guest Name: _____

TOTAL \$ _____

Please indicate any guest special needs: Diabetic Vegetarian Allergies _____

Other: _____ Are the guest's allergies life threatening? Y N

Physical: Please check here if guest requires special accommodations and email a description of needs to ahiggins@inbar.org.

SPECIAL NEEDS & OTHER INFORMATION

Please indicate any special needs: Diabetic Vegetarian Allergies _____

Other: _____ Are your allergies life threatening? Y N

Physical: Please check here if you require special accommodations and email a description of your needs to ahiggins@inbar.org.

Name _____

Address _____

City, State, Zip _____

Phone (____) _____ Email _____

In case of emergency during the Annual Meeting, please contact:

Name: _____

Phone Number: _____

Payment Information

Check (make payable to Indiana State Bar Association)

Credit Card (3-4 digit Card Verification Code & signature required)

VISA MasterCard Discover

Card Number _____

Exp. Date _____ / _____ 3-4 digit Card Verification Code _____

Signature _____

A \$25 service fee will be applied to cancellations received on or before 10/2/19. No refunds on cancellations received after 10/2/19. If you send someone else in your place, please provide ISBA with that person's name.



INDIANA STATE BAR ASSOCIATION • www.inbar.org
One Indiana Square, Suite 530 • Indianapolis, IN 46204
317-639-5465 • 800-266-2581 Toll Free • 317-266-2588 Fax

Register online at www.inbar.org or submit completed registration form to:

Fax: 317-266-2588, **Attn:** CLE & Events • **Email:** cle@inbar.org
For more information, please call the ISBA at 800-266-2581.