



Attendee Registration Form

18th Annual MDLA Women Lawyers' Breakfast

Imposter Syndrome – And What To Do About It

July 18, 2019, 8:00 – 10:00 a.m.
The Marquette Hotel, Planets Room, Windows on Minnesota

Main Contact Name _____
Firm _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
E-mail _____
Dietary Restrictions _____

Registration

- x ___ MDLA Member \$45 (By June 28); \$60 (After June 28)
 x ___ Non-member \$60 (By June 28); \$75 (After June 28)

Payment Total enclosed: \$ _____

Send your completed registration form and payment to:
MDLA • 1000 Westgate Drive, Suite 252
St. Paul, MN 55114 • or fax to 651-290-2266

(For office use only)

initials		fin.
date		
CK/CC		
amt. paid		
bal. due		

Payment

- Check VISA MasterCard Discover AMEX

All credit card fields are required.

Card Number _____ Exp. date _____ 3-digit security code _____
Cardholder Name (print) _____ Cardholder Phone _____
Cardholder Signature _____

Credit Card Billing Address: Same as address above

Address _____ County _____
City _____ State _____ Zip _____

Per PCI Compliance standards, this form will not be accepted via email. Please mail or fax submissions.

Cancellation Policy: Cancellations received by the MDLA office at least 10 days prior to the event date are eligible for a refund of the registration fee less a \$20 processing fee. No refunds will be provided for cancellations received fewer than 10 days prior to the event. No-shows will not receive a refund.