

CONFERENCE REGISTRATION FORM

(advance registration deadline – June 4, 2003)

To register directly via the internet, visit www.abanet.org/intelprop/summer2003

- YES, please register me for the 10th Annual Summer IPL Conference, June 18-22, 2003.
- NO, I cannot attend this program. Please send me the CLE course materials on CD-ROM, available after this meeting at the price of \$75.00, which includes postage and handling. I understand that in order to receive the materials, payment must accompany this form. (Please allow 4-6 weeks from date of program for receipt of course materials).

Registrant Information

Name: _____

Company/Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: () _____ FAX: () _____

E-mail: _____

ABA Membership ID No. _____

Check here if this is your First Summer IPL Conference

State(s) registered to practice in:

State _____ State Bar ID # _____

State _____ State Bar ID # _____

State _____ State Bar ID # _____

A. Registration Fee:

advance after 6/4

\$400 \$450 IPL Section Members

\$400 \$450 Not an ABA IPL Section member, but a member of one or more of the co-sponsoring associations (listed on the first page of the brochure) (Name of association: _____)

\$450 \$500 ABA member, but not an IPL Section member, nor a member of any of the co-sponsoring associations (includes \$35 IPL Section dues)

\$600 \$650 Not an ABA member, nor a member of one of the supporting associations

B. Printed Course Materials Option:

\$75 Please reserve for me (in addition to the CD-ROM), a printed set of course materials. Orders for printed materials must be received by June 4, 2003. Printed course materials will be available onsite for pickup upon check-in at the Conference registration desk.

C. Spouse/Guest Registration Fee:

\$175 \$225 For each spouse/guest (16 years or older accompanying registrant).

Spouse/guest(s) full name(s) for name badge:

Accompanying Children:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____



Questions? Please e-mail intelprop@abanet.org or call 312/988-5598. If any special arrangements are required for a disabled individual to attend this program, or any special dietary menus are required for meal functions, please note them below:

D. Meal Events

Please indicate which of the following tours/events you plan to attend (please include the events covered in the registration fee, even though there is no ticket price – it helps us with planning):

		Number	Amount
6/18	Spouse/Guest Luncheon with Animal Trainer @ \$35	_____	\$ _____
6/18	Pool Deck Welcome Reception/Dinner	_____	no fee
6/19	Thursday Section Luncheon – Guest Speaker, Hon. M. Margaret McKeown, @ \$45	_____	\$ _____
6/19	An Evening at Sea World/ Dinner @ \$100	_____	\$ _____
6/20	Friday Section Luncheon – Guest Speaker, Hon. Kenneth W. Starr, @ \$45	_____	\$ _____
6/20	San Diego Padres Baseball Game with Tailgate Party Dinner @ \$50	_____	\$ _____
6/21	Closing Night Cocktail Reception	_____	no fee
6/22	Buffet Breakfast	_____	no fee

Total Meal Event Fees: _____ \$ _____

E. Optional Events

Please indicate which of the following tours/events you plan to attend:

		Number	Amount
6/18	Half-Day Tour – San Diego Zoo @ \$60	_____	\$ _____
6/19	Half-Day Tour – Scenic San Diego by Land and Sea @ \$40	_____	\$ _____
6/19	Full Day Tour with lunch – La Jolla, Birch Aquarium @ \$85	_____	\$ _____
6/20	Full Day Tour with lunch – Foxploration Mexico @ \$80	_____	\$ _____
6/20	Half-Day Tour – Coronado Walking Tour @ \$30	_____	\$ _____
6/21	Half-Day Tour – Passport to Balboa Park @ \$65	_____	\$ _____
6/21	Wild Animal Park Photo Caravan @ \$160	_____	\$ _____
6/21	Golf Tournament w/box lunch @ \$160	_____	\$ _____
6/21	Tennis Tournament @ \$35	_____	\$ _____

Total Tour/Event Fees: _____ \$ _____

TOTAL OF ALL FEES:

A. Registration	Subtotal:	\$ _____
B. Printed Course Materials Option	Subtotal:	\$ _____
C. Spouse/Guest Fees	Subtotal:	\$ _____
D. Meal events	Subtotal:	\$ _____
E. Optional events	Subtotal:	\$ _____
TOTAL (A – E):		\$ _____

Course Materials on CD-ROM (non-registrants only) _____ \$ _____

PAYMENT:

Credit Card: VISA MasterCard American Express

Card no. _____ exp. date: _____

Signature: _____

Print name as it appears on card: _____

Check enclosed. Payable to the AMERICAN BAR ASSOCIATION for program registration fee and optional events in the amount of \$ _____.

Purchase Order No. _____ (government employees only)

CONFIRMATION:

Thank you for your registration. A confirmation will be sent to you via e-mail. If you prefer your confirmation by fax or U.S. Mail, please indicate below:

Fax U.S. Mail

Return this form to:

Section of Intellectual Property Law, M/S 10.5
 Attn: Summer IPL Conference
 American Bar Association
 750 N. Lake Shore Drive
 Chicago, IL 60611
 Fax: 312/988-5628