# NLADA

# National Legal Aid & Defender Association Litigation and Advocacy Leaders Conference

### Online Registration

Available at: <u>www.nlada.org</u>

Return Forms

## NLADA

Attn: Litigation Leaders 1901 Pennsylvania Avenue, NW Suite 500 Washington, DC 20006 FAX: (202) 872-1031 \*Please do not email forms

Questions?

About the conference: Contact the NLADA Training Department at registration@plada.org

About NLADA membership: Contact the NLADA Membership Department at <u>membership@nlada.org</u>

### Cancellation

Registration fees will be refunded (less a \$75 administrative fee) for any cancellations received in writing before June 8, 2018. All cancellations received after June 8 are non-refundable and will be for credit only. Attendee substitutions are still permitted. Cancellations received after July 6 will not be eligible for refunds or credits.

Location

B Ocean resort 1140 Seabreeze BLVD Fort Lauderdale, FL 33316

Join NLADA & Save
Individual Attorney: \$100
Non-Attorney Professional: \$60
Student: \$35
Client Advocate: \$20

Please direct membership inquiries to: membership@nlada.org.

### **REGISTRANT INFORMATION** (One form per registrant. Please Print Clearly)

Full Name:		
First Name on Badge:		
Title:		
Organization:		
Address:		
City, State, Zip:		
Email:		
Phone:		
Will you apply for CLE credits?	′es 🗌 No	
If yes, which state (s):		
Dietary Options: Regular Vegetar	ian 🗌 Gluten Free	Vegan Other
Special ADA-Related Needs: Audio/V	'isual Mobility	Other
PRECONFERENCE FEES	[	
	Members	Non-members
Building Strategic Advocacy: Culture and Practice:	\$100	\$125
Emerging Leaders Workshop*:	<b>\$100</b>	\$125
*Conference	e registration requi	red
CONFERENCE REGISTRATION FEES		
Conforma Domintuction	Regular	Onsite
Conference Registration	3/25 - 6/15	6/16 - Onsite
Member:	\$495 \$695	\$550 □ \$750
Non-Member:		
(Non-member fee includes co	inplimentary i-year N	ILADA Membership)
PAYMENT (Registration will not be p		some form of payment)
Check AMEX Visa	] MasterCard	
Credit Card # /	/ /	Exp. Date /
Name on Card:		Total Payment:
		\$
Signature:		Ψ
Purchase Order Complete below for	P.O. only. Purchase o	rders must be received by June
Contact: Name		
Email:		
Phone:		
P.O. #:		