



LEGAL CONFERENCE REGISTRATION

**YES, PLEASE REGISTER ME FOR THE 23ND ANNUAL CONFERENCE ON
LEGAL ISSUES IN BRAIN INJURY**

OCTOBER 7-9, 2010 AT THE HILTON MINNEAPOLIS HOTEL

Name _____ Title _____

Name for badge _____

Company _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Conference Fees

NABIS Member Rate: \$645.00 x _____

Non-NABIS Member Rate: \$695.00 x _____

Registration Grand Total \$ _____

Check, purchase order, or charge card information must accompany this form. Make checks payable to NABIS.
(Note: Purchase orders must be paid prior to conference.)

Payment method

_____ Check _____ MasterCard _____ Visa _____ Amex _____ Purchase Order

Card Number _____ Exp. Date _____

Card Holder (Please Print) _____

COMPLETE AND RETURN WITH FULL PAYMENT TODAY TO:

NABIS Conference
PO Box 1804
Alexandria, VA 22313

Phone: (703) 960-6500

Fax: (703) 960-6603

E-mail: conference@nabis.org

Please duplicate this form for group registrations.

CANCELLATION POLICY

If you need to cancel for any reason, you will receive a full refund (less a \$50.00 processing fee) only if you notify NABIS in writing at least 15 business days prior to the conference. There are no refunds for no-shows.

FOR NABIS USE ONLY	
Date Received: _____	Bal Due: _____
Amount Rec.: _____	Ack Dat: _____
Payment Method: _____	