

2018 California Lawyers Association Section Enrollment Form

HOW TO ENROLL: Print this form, fill it out and mail it with a check or credit card information to: Section Enrollments, The California Lawyers Association, 180 Howard Street, Suite 410, San Francisco, CA 94105-1639. Or email the form to programregistrations@calawyers.org (credit card payments only). Newsletters and other CLA communications will be mailed to the address we have on file for you.

Name:			
Bar Number (leave blank if not a California attorney):			
Firm:			
Street Address:			
City, State and Zip:			
Telephone:			
Fax:			
E-mail address:			
ENROLLMENT: Please enroll me in the Section(s) indicated below. LAW STUDENTS: Sign up for three free one-year student membership.			
\$95 Antitrust, UCL and Privacy Law	\$95 Law Prac	tice Management and Technology	
\$95 Business Law	\$95 Litigation	1	
\$95 Criminal Law	\$95 Public La	w	
\$95 Environmental Law	\$95 Real Pro	perty Law	
\$95 Family Law	\$95 Solo and	Small Firm	
\$95 Intellectual Property	\$95 Taxation		
\$95 International Law	\$95 Trusts &	Estates	
\$95 Labor & Employment Law	\$95 Workers	' Compensation	
TOTAL FEE(S) = PAYMENT: Payment of your Section enrollment(s) may be mad Lawyers Association. CREDIT CARD (Visa/MasterCard only): I at enrollment to my VISA or MasterCard account. (No other credit	uthorize the California L	awyers Association to charge my section(s)	
Account Number:			
Expiration Date:			
CVV Code (See Reverse of Card):			
Cardholder's Name:			
Cardholder's Signature:			
Cardholder's Billing Address:			
City:	State:	Zip Code:	