

Prefix: Mr. / Mrs. / Ms. First	t Name:		Last Name:		
Badge Name (ie, Bob for R	-				Umpire
Which best describes your	participation at the conf	erence? 🗆 Lav	v Firm 🗆 Compa	any 🗆 Arbitrator	
Title:		Com	pany Name:		
Street Address:			Suite/Floor:		
City:	State/F	Province:	Postal Code:	Count	ry:
Phone:		_ Email:			
I would like to earn CLE cre	edits for the following sta	te (mark all that	apply): 🗆 IL	□ NY □ PA	🗆 Other:
ADA or Special Needs:					
Dietary Restrictions: Food Allergies:					
Emergency Contact Name	:			Phone	:
SESSION SELECTION	AND PREFERENCES:				
Note: This is a free worksho Conversations that Ma Please rank your top five	r Arbitrators Workshop p for arbitrators attending the c atter: Roundtable Discu e (5) roundtable topics in orc ng Conference page for top	onference. Attendee ussions: Emerg ler of preference v	s should bring their bu ing Risks – New	and Evolving, Ma	y 3 <sup>rd</sup> , 3:30pm–5:30pm
Autonomous vehicle	es Big Data	Blockchair	n Technology	Drones	Enterprise Risk Management (ERM)
	Nanotechnology				
ARIAS∙U.S. 2017 Spri	na Conference Ree	aistration Fe	es (please circ	le vour fee):	
Registrant Type	Early (due March 20)	<b>Regular</b> (due April 24)	Late (Onsite)	•	e designated corporate representatives ambers.
Member*	\$1,055.00	\$1,105.00	\$1,205.00	**Non-members may apply for membership and receive member rates. Application is available online through th Membership section of the website.	
Non-member**	\$1,405.00	\$1,455.00	\$1,555.00		
Not included in registration fee:	onference. For security purposes, you	attendees and quests	registered in advance m	wo cocktail receptions. Bay attend the meals and re	cception. All registrants will be provided
	-		GUEST RA		DUE:
PAYMENT INFORMATION			*Guest names for conference badges will be collected at a later date.		
You may register for the 2017 ARIAS·U.S. Spring Conference online at www.arias-us.org or complete the following credit			\$250 Guest – All Meals: \$		
card information and submit the form to: ARIAS·U.S., 7918 Jones			\$50 Guest Lunch Ticket – Wednesday, 5/3: \$		

Branch Drive, Suite 300, McLean, VA 22102 or via fax 703-506-3266 or via email info@arias-us.org. For payment by check, please make the check payable to ARIAS.U.S. (Fed ID #13-3804860) and send to: By First Class mail: ARIAS. U.S., 6599 Solutions Center, Chicago, IL 60677-6005; By Overnight mail: ARIAS-U.S., Lockbox #776599, 350 E. Devon Ave., Itasca, IL 60143

Credit Card #:\_\_\_\_\_

\$60 Guest Reception Ticket – Wednesday, 5/3: \$

\$40 Guest Breakfast Ticket – Thursday. 5/4: \$\_\_\_\_

\$50 Guest Lunch Ticket – Thursday. 5/4: \$\_\_\_\_

\$60 Guest reception Ticket – Thursday. 5/4: \$\_\_\_\_\_

CONFERENCE REGISTRATION FEE: \$

TOTAL DUE: \$\_\_\_

Exp Date:Billing Zip Code:	_Sec Code <u>:</u>	Signature:
Name as it appears on card:		Date:

Cancellation Policy: The cutoff date for a full refund of the Conference Registration fee is March 20th, Anyone who cancels between that date and April 24th will receive a refund, less a \$100 administrative fee. Notification must be received in writing by email, fax, or postal mail. Refund will be issued by check. Failure to cancel by April 24th will result in forfeiture of the entire registration fee.

Financial Hardship Policy Statement: As required by the New York and Illinois CLE Boards, if a member of the state's bar would like to attend an ARIAS U.S. conference, but finds that he or she would incur a financial hardship by doing so, an application for waiver of the attendance fee may be made to the Board of Directors of ARIAS U.S. Such application would be held in strict confidence.