



# 2019 Spring Conference Registration Form

(a separate form is required for each attendee)

Prefix: Mr. / Mrs. / Ms. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Badge First Name (e.g., Bob for Robert): \_\_\_\_\_ ☐ I am a First-Time Attendee ☐ I am an Arbitrator/Umpire

Which best describes your participation at the conference? Check all that apply: ☐ Law Firm ☐ Company ☐ Arbitrator

Title: \_\_\_\_\_ Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite/Floor: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I would like to earn CLE credits for the following state (mark all that apply): ☐ IL ☐ NY ☐ PA ☐ Other: \_\_\_\_\_

ADA or Special Needs: \_\_\_\_\_

Dietary Restrictions: ☐ Vegetarian ☐ Vegan ☐ Kosher ☐ Gluten-Free

Food Allergies: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

ARIAS-U.S. posts on the conference page of the website the list of registrants including attendee name, organization, city, and state. Please indicate your preference to be included on this list. ☐ Yes, include me. ☐ No, do not include me on this list.

## WEDNESDAY, MAY 8 EVENT AND SESSION SELECTION:

Please indicate if you plan to attend the following sessions:

**Women's Paint and Pour Networking Event, 10:00am–12:00pm:** ☐ Yes, I plan to attend. ☐ No, I do not plan to attend.

Note: This is a free networking event for women. Please see description in schedule.

## THURSDAY, MAY 9 SESSION SELECTION:

Please indicate if you plan to attend the following sessions:

☐ Developments in  
Reviver Statute Legislation  
- How Much is the Door  
Open?

☐ Impact of Regulatory  
Restructuring Mechanisms  
on Contractual Dispute  
Resolution Procedures

☐ Do I Qualify?  
Navigating the Life  
Requirement in  
Arbitration Clauses

☐ Revisiting the Use  
of Experts in Arbitration  
Hacking Privileged and  
Confidential Information

☐ Hacking Privileged  
and Confidential  
Information

## ARIAS-U.S. 2019 SPRING CONFERENCE REGISTRATION FEES

(please circle your fee):

Registrant Type	Early (due March 20)	Regular (due April 26)	Late (April 27-Onsite)
Member*	\$1,055.00	\$1,105.00	\$1,205.00
Non-member**	\$1,405.00	\$1,455.00	\$1,555.00

**Member/Non-member registration fee includes:** Meeting costs, program materials, coat check, two breakfasts, one luncheon, and one cocktail reception. Only conference attendees and guests registered in advance may attend the meals and reception. All registrants will be provided a name badge to wear during the conference. For security purposes, you will be required to wear your name badge at all times during conference activities. **Not included in registration fee:** Travel and lodging.

\*Members include designated corporate representatives and individual members.

\*\*Non-members may apply for membership and receive member rates. Application is available online through the Membership section of the website.

## CALCULATE YOUR TOTAL DUE:

CONFERENCE REGISTRATION FEE: \$ \_\_\_\_\_

### GUEST RATES\*

Please select below if you are inviting a guest to attend meals and reception only

\$250 Guest – All Meals: \$ \_\_\_\_\_

\$50 Guest Lunch Ticket – Wednesday, 5/8: \$ \_\_\_\_\_

\$60 Guest Reception Ticket – Wednesday, 5/8: \$ \_\_\_\_\_

\$40 Guest Breakfast Ticket – Thursday, 5/9: \$ \_\_\_\_\_

\$50 Guest Lunch Ticket – Thursday, 5/9: \$ \_\_\_\_\_

\$60 Guest Reception Ticket – Thursday, 5/9: \$ \_\_\_\_\_

\$40 Guest Breakfast Ticket – Friday, 5/10: \$ \_\_\_\_\_

Guest Name: \_\_\_\_\_

Please list any dietary restrictions of Guest: \_\_\_\_\_

**TOTAL DUE:** \$ \_\_\_\_\_

## PAYMENT INFORMATION

You may register for the 2019 ARIAS-U.S. Spring Conference online at [www.arias-us.org](http://www.arias-us.org) or complete the following credit card information and submit the form to: ARIAS-U.S., 7918 Jones Branch Drive, Suite 300, McLean, VA 22102 or via fax 703-506-3266 or via email [info@arias-us.org](mailto: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 #: \_\_\_\_\_

Exp Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Billing Zip Code: \_\_\_\_\_ Sec Code: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Signature: \_\_\_\_\_

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 26 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 26 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. By registering for this ARIAS-U.S. event you consent to the ARIAS-U.S. Data Privacy Policy, which can be found online at <https://www.arias-us.org/about-arias-us/arias-u-s-data-privacy-statement/>.