

# Registration Form

Return This Form TO: CSUSA  
352 Seventh Avenue Suite 739  
New York NY 10001  
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E: amy@csusa.org

Event: Mid-Winter Meeting  
February 4-6, 2010  
JW Marriott Camelback Inn  
5402 E. Lincoln Drive  
Scottsdale AZ 85253  
(480) 948-1700

NAME: \_\_\_\_\_

FIRM: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

GUEST: \_\_\_\_\_

STATE BAR & NUMBER: \_\_\_\_\_

I DO NOT NEED CLE

## REGISTRATION:

### Government, Student

	Member	Non-Member	Academic	Guest (Adult)	Guest (Child)
Early Bird	<input type="radio"/> \$475.00	<input type="radio"/> \$575.00	<input type="radio"/> \$300.00	<input type="radio"/> \$375.00	<input type="radio"/> \$200.00
After Jan 8	<input type="radio"/> \$575.00	<input type="radio"/> \$675.00	<input type="radio"/> \$400.00	<input type="radio"/> \$450.00	<input type="radio"/> \$225.00

Special Meal

Vegetarian

Vegan

Kosher

## EVENTS:

Tour

\$35.00

## SPOSORSHIP:

Event

Available

Partial

Exclusive

Breakfast

Friday

Saturday

\$500.00

\$1,000.00

Luncheon

Friday

\$1,000.00

\$2,000.00

Reception

Thursday  Friday

\$2,000.00

\$5,000.00

**Total: \$**

Method of Payment:

MasterCard

Visa

American Express

Check

MM YY

Credit Card No.: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

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

Security # \_\_\_\_\_

Please make check payable to "THE COPYRIGHT SOCIETY OF THE U.S.A." Payment by check or credit card *must* accompany this form.

**Cancellation and Refund Policy:** Full refund will be issued if a cancellation is received in writing by January 20, 2009. No refunds or credits will be issued for cancellations after January 27, 2008. Registrations are transferable.