REGISTRATION FORM

17th Annual Center for Alcohol Policy Alcohol Law and Policy Conference

Please fill out this registration form and submit via email to matthewm@centerforalcoholpolicy.org or fax to (703) 739-0851.

NAM <u>E</u>					
TITLE					
COMPANY					
ADDRESS					
CITY			STATE	ZIP	
PHONE			FAX		
EMAIL ADDRESS (REQUIRED)					
STATE(s) SEEKING CLE CREDITS FO (Please include your bar number)	R				
REGISTRATION FEES					
Please select your regis	tration type:				
Full Registration	\$799				
501(c)(3)	\$249				
Government Official	\$249				
PAYMENT METHOD					
1. Make check paya	ble to: Center	for Alcohol Policy			
2. Credit Card	VISA	MasterCard	American Express		
ACCOUNT NO. EXP DATE.				CVV	
NAME ON CREDIT CARD					
CARDHOLDER ADDRESS					
INITIAL HERE					