

California Workers' Compensation Defense Attorneys' Association



December 3-5, 2009
The Ritz-Carlton
Half Moon Bay, CA

Name: _____ Bar #: _____
 Firm Name: _____
 Address: _____
 City: _____, CA Zip Code: _____
 Office: _____ Direct: _____
 Cell: _____ Fax: _____
 Email: _____
 Name of Guest: _____

	"Early Bird" Postmark by Sept. 15	Regular Postmark by Nov. 19	Door After Nov. 19
Member (sessions, materials, meals, & reception)	_____ \$545/psn	_____ \$645/psn	_____ \$745/psn
Non-Member (sessions, materials, meals, & reception)	_____ \$745/psn	_____ \$845/psn	_____ \$945/psn
Guests (Includes Fri and Sat breakfast & reception)	_____ \$150	_____ \$175	_____ \$200

*Please contact StageOne Events for special meal or ADA requests

Sign me up for membership or renewal NCWCDA SCWCDA _____ persons @ \$249

Up to \$99 of your membership or conference fees may be used as a contribution to the CWCDAA PAC. This contribution is not tax-deductible. If you do not wish to make such a contribution, please check this box (this will not effect your fees, only how the money is allocated).

Makes checks payable to "CWCDAA"

If you would prefer payment by credit card, please fill out the information below.

Credit Card: VISA MASTERCARD Total Submitted: \$ _____
 Card #: _____ Exp Date: _____
 Name on card: _____ CSV on back of card: _____
 Credit card billing address: _____ Zip: _____
 Signature: _____

A \$50 Administrative Fee will be charged on all written cancellations or transfers requests received by November 1, 2009. There will be no refunds after November 1, 2009

Mail Registration forms to: StageOne Events Tel: (925) 240-9160
 c/o CWCDAA Fax: (925) 240-1996
 PO Box 1238
 Brentwood, CA 94513