**International Law and Religion Symposium Registration  
October 3-6, 2010, Brigham Young University, Provo, Utah**

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| **Printer Friendly Registration Form** |
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| Mail completed form with payment to Brigham Young University Attn: Accounting Office 367 JRCB Provo, UT 84602 or fax (including cc info) to 801-422-0401. Pre-registrations may also be paid at the door. **All registrations must be received by midnight September 24, 2010**.  For questions about registration, call 801-422-5677 or e-mail us at the [J. Reuben Clark Law School Accounting Office](mailto:imblerm@lawgate.byu.edu) (imblerm@lawgate.byu.edu).  For event questions, call 801-422-3685. |

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| **Contact Person:** | (i.e., John Doe) |
| **E-mail Address:** | (i.e., doej@yahoo.com) |
| **Mailing Address:** |  |
|  |  |
| **City:** | **State:**    **Zipcode:** |
| **Phone:** | **FAX:** |
| **State & Bar#** | (for CLE credit) |

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| ***Selection*** | ***Activity*** | ***Price*** | ***Subtotal*** |
| ***Please Select One of the Following:*** | | | |
|  | Symposium Registration - non-law student   (includes 11 hrs. of CLE credit) | $40.00 each | 0.00 |
|  | Symposium registration - law student | No Cost |  |
| ***Please Select All That Apply:*** | | | |
|  | Lunch on Monday, October 4 | $15.00 each | 0.00 |
|  | Lunch on Tuesday, October 5 | $15.00 each | 0.00 |
| ***Total*** | | | 0.00 |

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| **Please check the sessions you plan to attend.  (Note that times are subject to change. Please see the** [**most current event program**](http://www.iclrs.org/index.php?content_id=418&link_id=152&page_id=2) **on the ICLRS website for more details.)** | | |
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| Sunday, October 3, 2009 | | |
|  | 7:00 PM | Opening Session |
|  |  |  |
| Monday, October 4, 2009 | | |
|  | 8:30 - 11:30 AM | Morning Session |
|  | 11:45 AM - 1:30 PM | Lunch |
|  | 1:30 - 4:00 PM | Afternoon Session |
|  |  |  |
| Tuesday, October 5, 2009 | | |
|  | 9:00 - 12:30 AM | Morning Session |
|  | 12:45 PM - 2:00 PM | Lunch |
|  | 2:30 – 5:30 PM | Afternoon / Concluding Session |

To pay by Credit Card, please print this page and complete the following information.

Credit Card Number: \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_

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

Please check one: \_\_\_\_\_Visa \_\_\_\_\_MasterCard \_\_\_\_\_Discover \_\_\_\_\_AMEX

Signature of card holder: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name as it appears on Credit Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_