

CONFERENCE REGISTRATION FORM

Name:			
Mailing Address:			
Home Telephone:		Work Telephone:	
E-mail Address:			
Local Association (fu	ll name):		LSA LPA
Please check if applicable (include title):		State Officer	
State Chairman		Local Assoc. President	
Governor	CCLS		

To Register, Go To: www.legalprofessionalsinc.org/events

There is no registration fee for this virtual conference. If you previously registered and paid for the hybrid event, you will remain registered and your payment will be refunded.

I will attend the following luncheon:

Governor's
President's
Open

FOR INFORMATION, PLEASE CONTACT: Kim Oreno at (916) 239-4089 or Kim@legalprofessionalsinc.org

REGISTRATION DEADLINE: FEBRUARY 18 AT 5 PM