



GROUP Program Registration Form

Live Webcast / On-Location Course Group Registration / Registrant Update Form

Complete this form, including credit card charge information, and send by fax (215-243-1664) or mail to: **ALI CLE Customer Service Dept., Group Registration, 4025 Chestnut Street, Philadelphia, PA 19104-3099.** (If paying by check, please return this form with payment.) ALI CLE must receive all registrations with payment by 5:00 p.m. Eastern time the day preceding the program broadcast. Please contact ALI CLE Customer Service at 215-243-1600 for assistance.

Program Title _____ Course Code _____ Program Date _____

check one: On-Location Course Webcast

Primary Contact Name _____

check one: I am the coordinator *only* — OR — I will *also* attend below are *additions to my pre-registered group*

Firm / Organization _____

Street Address _____

City _____ State _____ Zip+4 _____

Phone (_____) _____ Fax (_____) _____

Primary Contact's E-mail Address: *(required for webcast registrations)* _____

Your e-mail address is required for webcast registrations. All communications (instructions, confirmation, etc.) will be sent to the e-mail address you provide. In addition, your e-mail address will serve as your username for webcast log in and study materials download.

If your Internet provider filters incoming e-mail, please add ali-cle.org to your list of approved senders to ensure your receipt of future e-mails.

Group Registrants (use page 2 if necessary)

please include e-mail addresses for each registrant listed

NAME ▼

PHONE ▼

E-MAIL ▼

1. _____
2. _____
3. _____
4. _____
5. _____

Payment must accompany registration

Amount enclosed \$_____ Check made payable to ALI CLE AMEX Mastercard Visa Discover

Card No. _____ Exp. Date _____ CVC _____ Signature _____

Name on card (*if different than registrant*) _____

How did you learn about this program? Please check all that apply:

E-mail promotion Printed publication Web search Colleague Advertisement of related course
 Facebook Twitter Other _____



GROUP Program Registration Form

Group Registration / Registrant Update Form — page 2

Group Registrants (additional names)

please include e-mail addresses for each registrant listed

NAME ▼	PHONE ▼	E-MAIL ▼
6.		
7.		
8.		
9.		
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20.		



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