



REGISTRATION FORM

**INDIANAPOLIS, IN
NOVEMBER 16-18, 2017**

Complete this registration form if you are paying by check. Fax or mail completed forms to:

Jump-Start Your Law Practice
8 West Ninth Street
Cincinnati, OH 45202
Fax: 513-929-9337

Company / School _____

First Name _____

Last Name _____

Nick name / Badge Name _____

Date of Birth ____ / ____ / ____

Preferred Address _____

City / State / Zip

Phone _____

Email _____

TICKET TYPE

\$99 STUDENT

\$99 LAWYER

\$2575 VENDOR

A confirmation will be emailed to you once your registration has been processed. If changes should be made or you do not receive a confirmation, contact us at 513-929-9333. A photo ID will be required onsite at check-in.

All registration forms with payment must be received by November 3, 2017.

Mail: 8 West Ninth Street

Cincinnati, OH 45202

Ph: 513-929-9333

Fax: 513-929-9337