

**2010 International Association of Law Schools  
Conference on Labour Law and General Assembly**

**REGISTRATION FORM  
DUE by March 15, 2010**

Name: \_\_\_\_\_ School: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Postal Code, Country: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Email Address \_\_\_\_\_

Spouse/Significant Other/Family Member (if Attending): \_\_\_\_\_

*\*The following information is for those in need of Visa Letters to obtain a Visa to enter Italy for this Program*

Passport Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Country of Passport: \_\_\_\_\_ Birth Date & Gender: \_\_\_\_\_

The registration fee for the Conference is US\$350 and includes your admission to program sessions, luncheons refreshment breaks and evening receptions and/or dinners. There is no fee for the General Assembly.

EVENTS	I PLAN TO ATTEND	ONE SPOUSE/SIGNIFICANT OTHER /FAMILY MEMBER ATTENDING*
Thursday, May 20 Dinner sponsored by the University of Milan, Fondazione Centro Nazionale di Prevenzione e Difesa Sociale and Fondazione Cariplo (may be fee for family member)		
Friday, May 21 Luncheon		
Friday, May 21 Reception sponsored by the University of Milan Fondazione Centro Nazionale di Prevenzione e Difesa Sociale and Fondazione Cariplo (may be fee for family member)		
Saturday, May 22 Luncheon		
Saturday, May 22 Reception Hosted by the Law School Admission Council (no fee for one family member)		

\*Details to follow on cost for spouse/significant other to attend 2 evening functions.

☐ Please indicate if you require a vegetarian meal.

**Disability-Related Assistance**

If you require a disability-related accommodation, please contact IALS by March 1 at [ialsmilan@aals.org](mailto:ialsmilan@aals.org).

**Payment Information:**

IALS accepts the following credit cards for payment of the conference registration fee (US\$350); Complete credit card information below:

☐ American Express    ☐ Master Card    ☐ Visa

Print Name on Credit Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration date: \_\_\_\_\_ / \_\_\_\_\_ (required for processing)

**I authorize a total of US\$ 350 to be charged on my credit card:**

Signature of cardholder: \_\_\_\_\_ Date: \_\_\_\_\_

**Refund Policy:** The registration fee will be refunded in full for written cancellation requests received by May 1, 2010. Contact the IALS by fax or by email at [ialsmilan@aals.org](mailto:ialsmilan@aals.org). No refunds will be given for cancellations received after May 1, 2010.

**IALS Board Registration Form due by March 15, 2010. Return by email to [ialsmilan@aals.org](mailto:ialsmilan@aals.org)**