



PARTICIPANT INFORMATION		
LAST NAME	FIRST NAME	PREFERRED NAME (FOR NAME TAG)
COMPANY/FIRM NAME		
MAILING ADDRESS (NO P.O. BOXES)		
CITY, STATE, ZIP		PHONE NO.
EMAIL ADDRESS		MOBILE NO.
PROGRAM NAME AND LOCATION		PROGRAM DATE
BAR ADMISSIONS		
State and ID number are required if you wish to receive CLE credit		
State	Bar ID#	Year Admitted
State	Bar ID#	Year Admitted
State	Bar ID#	Year Admitted
BACKGROUND INFORMATION		
How did you hear about us?	If "Conference" or "Other" please specify:	
Size of Firm		
Type of Practice	If "Other" please specify:	
PAYMENT INFORMATION		
Discount Code:		
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> American Express <input type="checkbox"/> Discover		
<input type="checkbox"/> Company Check (No personal checks accepted. Make checks payable to The Skilled Advocate Company)		
Credit Card No.	Exp.	CCV
Authorized Cardholder Signature		Date
<b>By signing below, I certify that I am a licensed attorney, in good standing and admitted to practice in the United States. I also certify that I understand and accept The Skilled Advocate Company's Refund and Cancellation Policies including all applicable fees.</b>		
Signature		Date



## The Skilled Advocate Company

### REFUND AND CANCELLATION POLICY

A refund, cancellation, transfer or substitution is effective on the date written notification of the request for a refund, cancellation, transfer or substitution is received and acknowledged by The Skilled Advocate Company (SAC). **Notice MUST be given by sending a Request for Refund, Cancellation or Transfer Form by email to [customerservice@skilledadvocacy.com](mailto:customerservice@skilledadvocacy.com).** Requests will not be accepted over the phone. Request for Refund, Cancellation or Transfer Forms must be sent **before** the start of the program or they will not be accepted.

#### **OPTIONS AND FEES:**

1. **Substitutions:** A participant may substitute another attorney from the **same firm** at no additional cost. All requests for substitution must be received no later than five (5) calendar days prior to the start of the program.
2. **Transfers:** A participant may transfer his/her tuition to another live program of same or similar value, as determined by SAC, within one calendar year of the start date of the original program. No transfers will be honored if made later than ten (10) days prior to the start of the program. **Transferring is a one-time only option. If a participant cannot attend the second program, he/she will be charged a cancellation fee based on the date of cancellation.** Transfers are in addition to the program registration fee and are subject to the following fees:
  - **30 calendar days or more prior to program start date** – no transfer fee charged
  - **Less than 30 but more than 7 calendar days prior to program start date** – \$200 transfer fee
  - **Less than 7 calendar days prior to program start date** – \$500 transfer fee
3. **Cancellations:** A participant may cancel his/her registration at any time prior to the start of the program subject to the following fees:
  - **30 calendar days or more prior to program start date** – no cancellation fee
  - **Less than 30 but more than 7 calendar days prior to program start date** – 50% of registration fee
  - **Less than 7 calendar days prior to program start date** – 100% of registration fee

**Cancellation fees are imposed regardless of cause.** However, if acts of God, government authorities, natural disasters or other emergencies beyond a participant's reasonable control make it impossible for a participant to attend a program, the above fees may be waived. SAC will assess such situations on a case by case basis and supporting documentation will be required in these circumstances.