



Lawyers Alliance  
for New York

Connecting lawyers, nonprofits, and communities

**REGISTRATION FORM  
SPRING 2010 WORKSHOPS ON LEGAL ISSUES FOR NONPROFITS**

For full workshop descriptions, visit [www.lawyersalliance.org](http://www.lawyersalliance.org)

**THE FEE FOR EACH WORKSHOP IS \$50/PERSON  
(\$45/person if payment is received at least three days in advance)**

Please mail or fax completed registration forms to Lawyers Alliance for New York, 171 Madison Avenue, 6th Fl., New York, NY 10016, fax: (212) 941-7458, or register online at [www.lawyersalliance.org](http://www.lawyersalliance.org). Please use a separate form for each applicant. We request payment in advance, as seating is limited. Make checks and money orders payable to: Lawyers Alliance for New York. If you have registered but cannot attend, please contact us at least three days prior to the workshop; otherwise, we will be unable to provide a refund. *Current New York Foundation grantees may attend all workshops for free.*

**Registrant's Name** \_\_\_\_\_ **Title** \_\_\_\_\_

**Organization** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_ **Email** \_\_\_\_\_

**1st Workshop Name** \_\_\_\_\_ **Workshop Date** \_\_\_\_\_

**2nd Workshop Name** \_\_\_\_\_ **Workshop Date** \_\_\_\_\_

**Please indicate if your organization is a:**  New York Foundation grantee

OR

**Method of Payment (check one):**  Visa  MasterCard  Amex  Check  Money Order

**Credit Card Number** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

**Amount Authorized/Enclosed \$** \_\_\_\_\_

(\$45 for one workshop or \$90 for two workshops, if payment received at least 3 days in advance)

**Signature** \_\_\_\_\_

**SPRING 2010 WORKSHOP PROMOTION**

When you register for two workshops, you or a colleague from your organization may register for a third 2010 workshop for free! To participate, you must register by mail, fax, or phone for the third workshop. For details, please contact Nancy Cruz at 212-219-1800, ext. 221.

**TO PARTICIPATE, PLEASE FILL OUT THE FOLLOWING:**

**3rd Workshop Name** \_\_\_\_\_ **Workshop Date** \_\_\_\_\_

**Name of Attendee (3rd workshop)** \_\_\_\_\_ **Title** \_\_\_\_\_