



# 2023 Virtual Employment Law Program

## June 2, 5 & 6, 2023

This program will offer CLE and networking opportunities for local government attorneys who practice employment law spanning over 3 days. This event will be held entirely online.

### REGISTRATION INFORMATION

Local Government Entity \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province/State \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**First Registrant**

Name \_\_\_\_\_ Title \_\_\_\_\_ E-mail \_\_\_\_\_

**Second Registrant**

Name \_\_\_\_\_ Title \_\_\_\_\_ E-mail \_\_\_\_\_

**Third Registrant**

Name \_\_\_\_\_ Title \_\_\_\_\_ E-mail \_\_\_\_\_

**Fourth Registrant**

Name \_\_\_\_\_ Title \_\_\_\_\_ E-mail \_\_\_\_\_

**Registration Fee includes:** Admission to all sessions, a networking event (online) and recordings of all sessions.

Cancellation / Refund Policy: Cancellations must be received in writing a month prior to the start of the event to qualify for a refund. All cancellations are subject to a \$25.00 administrative processing fee. Replacements are always welcomed. All refunds will be remitted 90 days after the event. Send all cancellations in writing to the IMLA Events Department.

**If you need an accommodation that will require special services, please provide a description of your needs and any special accommodations you may need below.**

Please indicate your registration type and options listed below (check all that apply) :

Registration Type	1 <sup>st</sup> Registrant	2 <sup>nd</sup> Registrant	3-9 Registrants*	10 or More Registrants*
IMLA Member	<input type="checkbox"/> \$199	<input type="checkbox"/> FREE	<input type="checkbox"/> \$75 Each	<input type="checkbox"/> \$25 Each
Non-Member*	<input type="checkbox"/> \$349	N/A	N/A	N/A

\*You must have 1 person from your office register under the full first registrant rate to qualify for the free second registration and discounted additional registration rates.

Bill Me  Check Enclosed  Visa  Master Card  
Make all checks payable to IMLA. U.S. currency only.

Amount \$ \_\_\_\_\_

Name \_\_\_\_\_

Card No. \_\_\_\_\_

Exp.Date \_\_\_\_\_ Security Code \_\_\_\_\_

Signature \_\_\_\_\_

REMITTANCE ADDRESS: International Municipal Lawyers  
Association P.O. Box 200016 Pittsburgh, PA 15251-0016