

# CONVENTION 2023

Hershey Lodge, Hershey, Pennsylvania  
June 1 - 4, 2023

## REGISTRATION FORM

(FORM MUST BE RECEIVED BY MAY 19, 2023)

WBASNY Members registering by May 5th will receive a \$50.00 discount on the weekend convention package

WBASNY Member

Name (please print)

First time attendee

Firm / Organization Name

WBASNY Chapter

Address

City / State / Zip

Phone

E-mail

### REGISTRATION FEES

**Weekend Convention Package:** (Friday, June 2 - Sunday, June 4) \$ 450 = \$ \_\_\_\_\_

Includes Friday and Saturday Continuing Legal Education Programs, Refreshment Breaks, Friday Reception and Awards Dinner, Saturday Breakfast, Saturday Reception and Installation Dinner, and Sunday Plenary Breakfast Meeting

**1 Day / 1 Night Convention Package:** (Friday, June 2 - Saturday, June 3) \$ 300 = \$ \_\_\_\_\_

Includes Friday Continuing Legal Education Programs, Refreshment Break, Friday Reception and Awards Dinner, and Saturday Breakfast

**1 Day / 1 Night Convention Package:** (Saturday, June 3 - Sunday, June 4) \$ 300 = \$ \_\_\_\_\_

Includes Saturday Continuing Legal Education Programs, Refreshment Break, Saturday Reception and Installation Dinner, and Sunday Plenary Breakfast Meeting

**Guest Convention Package:** (Friday, June 2 - Sunday, June 4) \$ 375 = \$ \_\_\_\_\_

Includes Refreshment Breaks, Friday Reception and Awards Dinner, Saturday Breakfast, Saturday Reception and Installation Dinner, Sunday Plenary Breakfast Meeting, and Convention Commemorative Tote Bag and Gift Items

Name of Adult Guest(s): \_\_\_\_\_

**Early Registration Discount — May 5 deadline, deduct \$50.00** - \$ 50 = \$ \_\_\_\_\_  
(Valid only for members registering for the weekend convention package)

**Please note that registration fees do not include hotel accommodations. All room reservations must be made individually through the hotel's reservation link located on the WBASNY website - [www.wbasny.org](http://www.wbasny.org). In order to reserve a room at the hotel, attendees must register for a Convention package or your room at the hotel will be cancelled.**

SUBTOTAL = \$ \_\_\_\_\_

- Weekend Children's Package (12 and under):** (Friday, June 2 - Sunday, June 4) \$ 125 = \$ \_\_\_\_\_
- Includes Refreshment Breaks, Friday Reception and Awards Dinner, Saturday Breakfast, Saturday Reception and Installation Dinner, and Sunday Plenary Breakfast Meeting
- Name(s) of Child(ren): \_\_\_\_\_

**CLE PROGRAMS AND SEMINARS —** I plan to attend the following CLE programs:

**Friday, June 2**

- Demystifying the New York State Court of Claims
- LGBTQ+ Issues Through the Lens of Bowers v. Hardwick
- I Said It. I Mean It. So Honor It.
- Strengthening Your Business Employment-based Immigration

**Saturday, June 3**

- Long Term Care Planning in New York
- No-Fault Insurance: Preserving Lost Earnings Claims
- Bias and Discrimination in the New York Courts
- Paid Surrogacy in the State of New York

**INDIVIDUAL FUNCTIONS**

- |   |                  |            |
|---|------------------|------------|
| <input type="checkbox"/> Thursday Evening in the Gardens Event  | # _____ X \$ 60  | = \$ _____ |
| <input type="checkbox"/> Friday Golf Clinic   | # _____ X \$ 35  |            |
| <input type="checkbox"/> Friday Golf Outing   | # _____ X \$ 85  | = \$ _____ |
| <input type="checkbox"/> Friday Hershey Chocolate World Excursion ( <i>space is limited to 40</i> )                 | # _____ X \$ 35  | = \$ _____ |
| <input type="checkbox"/> Friday Reception and Dinner  | # _____ X \$ 150 | = \$ _____ |
| Name of Adult Guest(s): _____   |                  |            |
| <input type="checkbox"/> Saturday Hershey History Special Excursion ( <i>space is limited to 25</i> )               | # _____ X \$ 35  | = \$ _____ |
| <input type="checkbox"/> Saturday Reception and Dinner  | # _____ X \$ 150 | = \$ _____ |
| Name of Adult Guest(s): _____   |                  |            |
| <input type="checkbox"/> Continuing Legal Education (per program)<br>(Please indicate which CLE you plan to attend) | # _____ X \$ 75  | = \$ _____ |

Please indicate any special needs:  vegetarian meals  vegan meals **TOTAL** \$ \_\_\_\_\_

**PAYMENT:**

- Enclosed is my check, made payable to "**WBASNY**", together with my registration form.  
Mail to: WBASNY Convention 2023, Post Office Box 936, Planetarium Station, New York, NY 10024-0546.

- Please charge to: American Express \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_

Name on Card: \_\_\_\_\_

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

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

Signature: \_\_\_\_\_ CVS#: \_\_\_\_\_

- ◆ If paying by credit card, you may fax your registration to: (212) 721-1620 or register on-line at: [www.wbasny.org](http://www.wbasny.org).
- ◆ Inquiries should be directed to: Linda Chiaverini at (212) 362-4445 or [events@wbasny.org](mailto:events@wbasny.org).

**FOR OFFICE USE ONLY**

Member ID: _____	Reg ID: _____	Amt. PD: _____	Received: _____
Member ID: _____	Reg ID: _____	Payment : _____	Entered: _____