

REGISTRATION INFORMATION

Please select the event below that you would like to attend.

- Orange County – Tuesday, June 23, 2009 Los Angeles – Wednesday, June 24, 2009

Please register only one person per form. Type or print clearly.

Name: _____

Company: _____ Title: _____

Physical address: _____

City: _____ State: _____ Zip: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Discount Code: _____

PAYMENT:

- One person at \$225.00
- Additional individuals from my firm at \$150.00 each (if you are registering for multiple people, please fill out a form for each person and supply the credit card information on only one of the forms indicating the total count)

Please charge my: MasterCard Visa American Express Discover

Name as it appears on card: _____

Card Number: _____ Expiration: _____

Signature: _____

Total attendees: _____

- Enclosed is a check or money order made payable to IFLC.

Registration form and full payment must be received together by June 9th.

Mail your registration to: P.O. Box 14512, Arlington, Texas 76094