



# REGISTRATION FORM

Please print or type.  
Use this form, visit [wssfc.org](http://wssfc.org), or call (800) 728-7788 to register.

Name \_\_\_\_\_  
 State Bar No. \_\_\_\_\_  
 Organization \_\_\_\_\_  
 Email address \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

	<b>By 9/14</b>	<b>After 9/14</b>	
State Bar of Wisconsin Members, Staff of State Bar of Wisconsin Members, WALA Members .....	\$380	\$430	\$ _____
Non-Members.....	\$480	\$530	\$ _____
Ultimate Pass Gold Subscribers* (Lunch not included).....	\$0	\$0	\$ _____
Ultimate Pass Silver Subscribers* (Lunch not included).....	\$190	\$215	\$ _____
Law Students* (Lunch not included) .....	\$0	\$0	\$ _____
Optional Lunches - Thursday & Friday ( <i>Lederer Award</i> ), each .....	\$30	\$30	\$ _____
Guests (Includes all breaks/meals/receptions).....	\$125	\$125	\$ _____

*\*LUNCH IS NOT INCLUDED IN REGISTRATION COSTS AND NEEDS TO BE PURCHASED SEPARATELY*

**NOTE: Please indicate whether you will attend the Thursday and Friday lunches when registering**

**TOTAL** \$ \_\_\_\_\_

Check Enclosed (payable to State Bar PINNACLE)  
 Ultimate Pass Subscriber  
 MasterCard     VISA     AMEX

Account # \_\_\_\_\_  
 Signature \_\_\_\_\_  
 Exp. Date \_\_\_\_\_

**When mailing or faxing this form:**

**Fax to:** (608) 250-6020 (credit card or Ultimate Pass only)  
**Mail to:** State Bar PINNACLE Registrations, P.O. Box 7158, Madison, WI 53707-7158  
 (check, credit card, passbooks, or Ultimate Pass)