

REGISTER NOW!

2020 Marital and Family Law Review Course

ONLINE: www.aamlflorida.org (Credit card payments ONLY)
QUESTIONS?: Call 877-892-7336 or email: familylawreviewcourse@mcraemeetings.com.

First Name (to appear on badge): _____ Last Name: _____

Florida Bar #: _____ Year Admitted to Florida Bar: _____ I am a Judge or Magistrate

Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

Correspondence E-mail: _____

FL Bar E-mail (if different than above): _____

REGISTRATION FEE (CHECK ONE):

MATERIALS: All Conference registration types include Electronic Materials. Book option NOT AVAILABLE after December 13th.

	On or before Dec. 13	After Dec. 13
<input type="checkbox"/> Family Law Section Member w/Books:	\$774	N/A
<input type="checkbox"/> Family Law Section Member NO Books:	\$675	\$725
<input type="checkbox"/> Non-Family Law Section Member w/Books:	\$874	N/A
<input type="checkbox"/> Non-Family Law Section Member NO Books:	\$775	\$825
<input type="checkbox"/> Attorney Practicing Less than 5 years w/Books:	\$624	N/A
<input type="checkbox"/> Attorney Practicing Less than 5 years NO Books:	\$525	\$575
<input type="checkbox"/> FL registered paralegals, full-time law college faculty or law student w/Books:	\$474	N/A
<input type="checkbox"/> FL registered paralegals, full-time law college faculty or law student NO Books:	\$375	\$425
<input type="checkbox"/> Persons attending under the policy of fee waivers* w/Books:	\$374	N/A
<input type="checkbox"/> Persons attending under the policy of fee waivers* NO Books:	\$275	\$325

For clarification on the category qualifications, please see page 2 of the brochure as well as www.aamlflorida.org.

*Includes Supreme Court, DCA, Circuit and County Judges, Magistrates, Child Support Hearing Officers, Judges of Compensation Claims, Administrative Law Judges, and full-time legal aid attorneys if directly related to their client practice. (We reserve the right to verify employment.)

Spouse/Guest Registration: \$275 Provides admission to continental breakfasts, lunch, and receptions. (Spouses/Guests are not permitted to attend educational sessions.) Spouse/Guest Name: _____

I acknowledge and agree to abide by the Review Course Cancellation/Refund policy as stated on page two of the brochure and on-line at www.aamlflorida.org. No registrations will be accepted without a signature.

SIGNATURE: _____

YOU WILL RECEIVE ONLY ELECTRONIC MATERIALS IF YOU REGISTER AFTER DECEMBER 13TH.

Materials will only be available for download until March 13, 2020.

PLEASE ENTER TOTAL REGISTRATION AMOUNT: \$ _____

METHOD OF PAYMENT:

Credit card payments may be made by registering online at www.aamlflorida.org

Check enclosed made payable to Review Course to be received on or before 12/13/2019 or a late fee is charged.

Mail to: Review Course Registration, 1401 Maclay Commerce Dr., Tallahassee, FL 32312

 Please check here if you have a disability that may require special attention or services. To ensure availability of appropriate accommodations, attach a general description of your needs by January 10, 2020. We will contact you for further coordination.

Register online at www.AAMLFlorida.org