CONFERENCE REGISTRATION FORM

Registration Deadline: October 1, 2002. Confirmation notices will be sent October 1, 2002.

Please type or print clearly and include all information.

Name ....................................................................................................................

Title ....................................................................................................................

Institution ....................................................................................................................

Mailing Address ....................................................................................................................

....................................................................................................................

Telephone Number .............................................................................................................

Fax Number ....................................................................................................................

E-mail ....................................................................................................................

Accompanying person(s) .............................................................................................................

<table>
<thead>
<tr>
<th>Earlybird Rates</th>
<th>Regular Rates</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Postmarked by Sept. 1</td>
<td>Postmarked after Sept. 1</td>
<td></td>
</tr>
<tr>
<td>IALL Member</td>
<td>US$ 300.00</td>
<td>US$ 350.00</td>
</tr>
<tr>
<td>Non-member (opens Aug. 1)</td>
<td>US$ 350.00</td>
<td>US$ 400.00</td>
</tr>
<tr>
<td>Accompanying person(s)</td>
<td>US$ 200.00</td>
<td>US$ 250.00</td>
</tr>
<tr>
<td>Optional Harvard day</td>
<td>US$ 75.00</td>
<td>US$ 75.00</td>
</tr>
</tbody>
</table>

(Nota: space for the program portion of the Harvard day may be limited)

TOTAL ......................................

Attention, non-members! Become a member for US$ 60.00, register now, save on conference registration, and get the International Journal of Legal Information for a year. Fill in the IALL Membership Application Form (pdf format) and mail separately to the address on the application form.

Payment

☐ Check. Make payable to Yale University, drawn in U.S. dollars from a U.S. bank.

☐ Credit Card ☐ MasterCard ☐ Visa

Card No. ....................................................... Expiration Date ...................................

Name on card if different from registrant .....................................................

Signature ............................................................................................................

Continued on next page
Social Events

Registration includes all receptions, all lunches, all excursions, and dinners on Monday and Wednesday evening. **For planning purposes, please mark the box next to the events you will attend.**

- Open house at Quinnipiac University School of Law Library (Sunday afternoon)
- Annual Dinner (Wednesday, 7:00 p.m.)

Dinner on Monday evening will be arranged for groups of twenty to thirty at several area restaurants. Please indicate by 1, 2, and 3 your first, second, and third choice of restaurant. For more information, see the restaurant section on the course website.

- .... Bentara (Malaysian)       ...... Scoozzi Trattoria and Wine Bar (Italian)
- .... Caffe Adulis (African)    ...... Union League Café (Continental)
- .... Gennaro’s Amalfi Grille (Italian) ...... Zinc (Modern American)
- .... Polo Grille and Wine Bar (Italian)

Special Instructions

Dietary requirements  □ Vegetarian   □ Kosher   □ Other (specify) ......................................................

Special requirements (specify) ..........................................................................................................................

Please return both pages of this registration form with payment to

Yale University Conference Services

Postal address  P.O. Box 208355
New Haven, CT 06520-8355
U.S.A.

UPS, FedEx  1 Prospect Street
11 SSS
New Haven, CT 06511
U.S.A.

Fax Registrations with payment by credit card may be faxed to 203-432-7345.

Cancellation and Refund Policy

All requests for refunds must be received in writing. Cancellations faxed or postmarked before October 1, 2002, will receive a full refund (less a US$ 15.00 processing fee). No refunds will be given for cancellations made after October 1, 2002.