

NOSSCR – San Francisco – October 14-17, 2009 CONFERENCE REGISTRATION INFORMATION

To receive the early registration rate, please make sure that your conference registration is physically received at the NOSSCR office NO LATER than Friday, October 2, 2009.

After Friday, October 2, 2009, the full registration rate will apply to registrations, including those on-site. So please remember to register early!

**Early Registration Rate:
(Received on or before October 2)**

**Full Registration Rate
Including “On-Site”
(Received after October 2)**

Sustaining Member:	\$460.00	\$675.00
Regular Member/Subscriber	\$575.00	\$675.00
Non-Member:	\$675.00	\$750.00

HOTEL:

Hyatt Regency San Francisco, 5 Embarcadero Center, San Francisco, CA 94111.

The hotel block of rooms will be released on September 17, 2009. Be sure to make your hotel reservations before the cut-off date. Reservations can be made by calling 1-888-421-1442 and telling the reservationists that you are with the NOSSCR conference **OR** you can make your reservations online at <https://resweb.passkey.com/go/NOSS>. The room rate is \$249.00 single/double.

CANCELLATIONS:

Cancellations must be received in writing. Cancellations received on or before October 1, 2009 will receive a full refund. Cancellations received between October 2-9, 2009 will be subject to a \$100.00 cancellation fee. After October 9, 2009 no refunds will be given. There are also no refunds for no-shows. You can fax (201-567-1542) OR email at nosscr@att.net.

Please complete the conference registration form on the reverse side.

OVER ►

Please complete the registration form below. **Please type or print clearly.**

Name: _____

Member ID # _____ **(ID # is 4 digit # located on mailing label)**

Address: _____

City, State & Zip: _____

Telephone: _____

Please make your check payable to NOSSCR.

- ✓ **We do not accept credit cards.**
- ✓ **No sustaining member discount given with "On-Site" registrations.**

**If you have a physical impairment and require assistance at the seminar, please let us know so that we can contact you and discuss your needs.
_____ YES, please contact me.**

ATTORNEYS: CONTINUING LEGAL EDUCATION

At the conference, you will receive a registration packet containing CLE information for the states you identify. Please make sure you carefully read and follow the directions on your memo!

STATE: _____

Bar Number: _____

STATE: _____

Bar Number: _____

STATE: _____

Bar Number: _____

ATTENDEES WHO ARE NOT ATTORNEYS: CONTINUING EDUCATION

NOSSCR will provide you with the documentation needed for SSA's Continuing Education requirement for those participating in the demonstration project. At the conference, you will receive the documentation in your registration packet.

Mail to:
NOSSCR, 560 Sylvan Avenue, Englewood Cliffs, New Jersey
07632