

## FOUR WAYS TO REGISTER

### ONLINE

credit card only  
www.cailaw.org

### FAX

credit card only  
972.244.3401

### MAIL

check or credit card  
The Center for American  
and International Law  
5201 Democracy Drive  
Plano, TX USA 75024  
972.244.3400

### PHONE

credit card only  
972.244.3400 or  
800.409.1090  
8:30am-5:00pm CST

Confirmations will be MAILED to all registrants.

## GENERAL INFORMATION

PAYMENT MUST  
ACCOMPANY REGISTRATION

### CANCELLATION POLICY:

Tuition less a \$50 cancellation fee will be refunded upon receipt of written cancellation received by June 6, 2008. Email [cburkel@cailaw.org](mailto:cburkel@cailaw.org). After these dates, no refunds, but substitution of attendees for this program will be permitted. Registrants not entitled to a refund will receive the course materials.

**MCLE CREDIT:** The Symposium has been approved by the State Bar of Texas for 12 hours, including 0 hours of ethics. Course ID Number: 900042919. Sign-in sheets and/or certificates of attendance will be available for ALL states.

## Join us for the

19th Annual ITA Workshop  
**Damages in International  
Arbitration: Strategies,  
Techniques and Presentation**  
June 19, 2008

The Westin Galleria Hotel,  
Dallas Texas

Visit [www.cailaw.org/ita](http://www.cailaw.org/ita)  
for more information

## REGISTRATION

# International Mergers & Acquisitions - Strategies and Trends

## ANNUAL SYMPOSIUM

Plano Texas, USA

June 17-18, 2008

Registration includes the program, course materials, continental breakfast, the hosted luncheons, dinner and the reception for conference registrants and faculty.

### Tuition:

- I am a member (or a designated representative of a member) of the Institute for International and Comparative law (no fee)
- \$275 Institute for Transnational Arbitration Advisory Board member
- \$545 for all classes and materials, plus lunches and dinner until June 6, 2008 (\$645 after June 6, 2008)

Name \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Firm/Company/Organization \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

City, State, Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

### PAYMENT INFORMATION

- Check enclosed payable to: *The Center for American and International Law*

Credit Card:  Mastercard  VISA  AMEX  Discover

Card number \_\_\_\_\_

Expiration date \_\_\_\_\_

Name on card \_\_\_\_\_

Billing address (if different than above address)

\_\_\_\_\_  
Signature \_\_\_\_\_

Web