

SEVEN WAYS TO REGISTER

ONLINE

credit card only

http://www.cailaw.org/ita/ITACCB_entrance10.html

FAX

credit card only

+1 (972) 244-3401

MAIL

credit card or check

The Center for American and International Law (ITA)
5201 Democracy Drive, Plano, Texas USA 75024

EMAIL

credit card only

cburkel@cailaw.org (ITA)

PHONE

credit card only

+1 (972)244-3405 (English)

BANK TRANSFER (US dollars)

Bank: Citibank NA, New York

Swift No.: CITIUS33

ABA Code: No: 021000089

Chips: No: 0008

Paying Bank: Banco de Occidente

Swift: OCCICOBC

Account Number: 10950229

Beneficiary: Camara de Comercio de Bogota

Account Number: 265-03534-5

BANK TRANSFER (Colombian pesos)

Bank: Banco de Occidente

Type of Account: Checking Account

Account Number.: 265-03715-0

Entity: Camara de Comercio de Bogota

Reference: ITA

PAYMENT MUST ACCOMPANY REGISTRATION

GENERAL INFORMATION

CANCELLATION POLICY:

Tuition less a \$50 cancellation fee will be refunded upon receipt of written cancellation received by September 23, 2010. If you registered through CCB, cancellations must be in writing and either faxed or emailed to: + (571) 2637892 or boletincac@ccb.org.co. If you registered through ITA, cancellations must be in writing and either faxed or emailed to: +1 (972) 244-3401 or cburkel@cailaw.org. After this date, no refunds, but substitution of attendees for this program will be permitted.

HOUSING:

The cost of housing is not included in the tuition. However, rooms (in limited number) have been reserved at the Hotel BH La Quinta y BH El Retiro. Registrants can reserve a room online at the reduced rate of 286,500 COP (approx \$169 USD) by visiting our website and completing the hotel information form: http://www.cailaw.org/ita/ITACCB_entrance10.html.

MCLE CREDIT:

This course has been approved by the State Bar of Texas for 5.75 hours, including 5 hours of ethics credit for the Workshop and 1.75 hours for the Roundtable. Course ID Numbers: 901207803 (Workshop) and 901206630 (Roundtable). Sign-in sheets and/or certificates of attendance will be available for ALL U.S. states.

REGISTRATION

ITA-CCB AMERICAS WORKSHOP:

Confronting Ethical Issues in International Arbitration

and featuring

Perspectives of Latin American Arbitral Institutions

October 14-15, 2010

Chapinero Campus, Arbitration and Conciliation Center of the Chamber of Commerce of Bogotá
Bogotá D.C., Colombia

Registration includes the Welcome Reception on October 14, the Workshop, the Workshop luncheon and course materials on CD on October 15.

To register for the Americas Roundtable for young lawyers only, please visit http://www.cailaw.org/ita/ITACCBRT_entrance10.html.

Check applicable box:

	Received by 9/23/10	Received after 9/23/10
Regular registration fee	<input type="checkbox"/> 450,000 COP/\$250 USD	<input type="checkbox"/> 495,000 COP/\$275 USD
ITA Member:		
Advisory Board Member	<input type="checkbox"/> 375,000 COP/\$200 USD	<input type="checkbox"/> 415,000 COP/\$225 USD
Supporting or Sustaining Member or Employee	<input type="checkbox"/> 375,000 COP/\$200 USD	<input type="checkbox"/> 415,000 COP/\$225 USD
CCB Member	<input type="checkbox"/> 375,000 COP/\$200 USD	<input type="checkbox"/> 415,000 COP/\$225 USD
Other Sponsor Member:		
_____ (Sponsor Name)	<input type="checkbox"/> 375,000 COP/\$200 USD	<input type="checkbox"/> 415,000 COP/\$225 USD
Student/Government Employee	<input type="checkbox"/> 40,000 COP/\$20 USD	<input type="checkbox"/> 85,000 COP/\$45 USD

- I am under 40 years old and plan to attend the Americas Roundtable for Young Lawyers on October 14 (75,000 COP/\$40 USD regular fee - 45,000 COP/\$25 USD member fee).
- I plan to attend the Welcome Reception for all faculty and registrants on Thursday, October 14.
- I plan to attend the Reception and Dinner for all faculty and registrants on Friday, October 15 (ticket price - 95,000 COP/\$50 USD).

Name _____

Firm/Company/Organization _____

Address _____

City, State, Postal Code, Country _____

Phone _____ Fax _____

Email _____

- I wish to bring a guest to the Friday night Reception and Dinner (ticket price - 95,000 COP/\$50 USD)

Guest Name _____

Guest Title _____

Firm/Company/Organization _____

Address _____

City, State, Postal Code, Country _____

PAYMENT INFORMATION

- I have sent my registration payment via wire transfer (see wire transfer instructions in the left column of this page)

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

Credit Card: Mastercard Visa AMEX Discover

Card number _____ Exp date _____

Name on card _____

Billing address (if different than above address) _____

Signature _____