

## Registration Form

To register online, please visit the TLA [website](#)  
Please note that there will be a 3% fee added to all online registrations.

### STEP ONE: Name Badge & Roster Information (please print legibly)

Registrant's Name: \_\_\_\_\_

(Print your name how you'd like it to appear on your badge and the attendee roster)

Company/Firm: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Email Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Special Dietary Needs/Allergies:  Vegetarian  Vegan  Gluten Free  Kosher  Other: \_\_\_\_\_

From what states will you be requesting CLE for this program? \_\_\_\_\_

### STEP TWO: Liability Waiver & Emergency Contact

Please read and sign. I agree and acknowledge that I am undertaking participation in TLA events and activities as my own free and intentional act, and I am fully aware that possible physical injury might occur to me as a result of my participation in these events. I give this acknowledgement freely and knowingly, and I am, as a result, able to participate in TLA events, and I do hereby assume responsibility for my own well-being. I am aware that photographs and video will be taken during the conference and may be published in *The Transportation Lawyer* and in promotional materials.

By signing their name below, the attendee is acknowledging that they have read our [Anti-Harassment Policy](#):

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Name

Relationship

Phone

### STEP THREE: Conference Registration

TLA Member  CTLA Member

	By Mar. 22	Mar. 23–Apr. 23	After Apr. 24
Member	<input type="checkbox"/> \$935	<input type="checkbox"/> \$1,095	<input type="checkbox"/> \$1,345
Non-Member*	<input type="checkbox"/> \$1,345*	<input type="checkbox"/> \$1,430*	<input type="checkbox"/> \$1,650*
Retired Member/Student	<input type="checkbox"/> \$600	<input type="checkbox"/> \$600	<input type="checkbox"/> \$600
Guest (13 and Older)**			
Name: _____	<input type="checkbox"/> \$495	<input type="checkbox"/> \$495	<input type="checkbox"/> \$495
Email: _____			
Special Dietary Needs/Allergies: <input type="checkbox"/> Vegetarian <input type="checkbox"/> Vegan <input type="checkbox"/> Gluten Free <input type="checkbox"/> Kosher <input type="checkbox"/> Other: _____			
Name: _____	<input type="checkbox"/> \$495	<input type="checkbox"/> \$495	<input type="checkbox"/> \$495
Email: _____			
Special Dietary Needs/Allergies: <input type="checkbox"/> Vegetarian <input type="checkbox"/> Vegan <input type="checkbox"/> Gluten Free <input type="checkbox"/> Kosher <input type="checkbox"/> Other: _____			
Child (4–12)			
Name: _____	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125
Child (3 and Younger) FREE			
Name: _____			
Special Dietary Needs/Allergies: <input type="checkbox"/> Vegetarian <input type="checkbox"/> Vegan <input type="checkbox"/> Gluten Free <input type="checkbox"/> Kosher <input type="checkbox"/> Other: _____			

I am a first-time attendee

I am Corporate Counsel

First-time attendees and Corporate Counsel are guaranteed the early rate regardless of when they register.

If you are only able to attend a portion of the meeting, see page two of the registration form for single-day pricing and registration.

**Registration Form**

Page 2

**STEP FOUR: Special Events & Single-Day Registration**

(Please print the name of the spouse/guest/child registering for the event on the line provided.)

**WEDNESDAY, MAY 1**

Golf Tournament – 1:00 p.m. Shotgun Start

- Attendee – \$175 Handicap \_\_\_\_\_
- Guest Name: \_\_\_\_\_ – \$175; Handicap \_\_\_\_\_
- Guest Name: \_\_\_\_\_ – \$175; Handicap \_\_\_\_\_

Tennis Tournament – 2:00 p.m. – 4:00 p.m.

- Attendee – \$30
- Guest Name: \_\_\_\_\_ – \$30
- Guest Name: \_\_\_\_\_ – \$30

**THURSDAY, MAY 2**

- Single-Day Education Program (member) – \$360
- Single-Day Education Program (non-member) – \$470

Group Networking Dinner

(The group networking tour and dine-around is an optional event and not included with registration. All attendees must pay the additional fee to attend the Thursday night event. There are two options for this event and an email will be sent regarding the selection of dine-around restaurant options.)

**Option #1:**

Old San Juan Walking Tour + Dine Around

- Attendee – \$115
- Guest Name: \_\_\_\_\_ – \$115
- Guest Name: \_\_\_\_\_ – \$115

(Event includes walking tour and scheduled bus transportation)

**Option #2:**

Condado Dine-Around

- Attendee – \$60
- Guest Name: \_\_\_\_\_ – \$60
- Guest Name: \_\_\_\_\_ – \$60

(Event includes scheduled bus transportation)

**FRIDAY, MAY 3**

- Single-Day Education Program (member) – \$360
- Single-Day Education Program (non-member) – \$470

Annual Reception and Banquet 6:00 p.m. – 9:00 p.m.  
Extra Event Ticket – \$175

(includes two drink tickets, reception, and banquet meal)

Note: The extra event ticket is for additional guests to attend the Annual Banquet only and not required for fully registered attendees and guests.

- Guest Name: \_\_\_\_\_ – \$175
- Guest Name: \_\_\_\_\_ – \$175
- Guest Name: \_\_\_\_\_ – \$175

**SATURDAY, MAY 4**

- Single-Day Education Program (member) – \$360
- Single-Day Education Program (non-member) – \$470

Fun Run/Walk – (includes custom-designed t-shirt)

- Attendee – \$30 T-Shirt Size \_\_\_\_\_
- Guest Name: \_\_\_\_\_ – \$30 T-Shirt Size \_\_\_\_\_
- Guest Name: \_\_\_\_\_ – \$30 T-Shirt Size \_\_\_\_\_

Evening Event

Note: This extra event ticket is for additional guests to attend the Saturday evening event only and not required for fully registered attendees and guests.

- Guest Name: \_\_\_\_\_ – \$150
- Guest Name: \_\_\_\_\_ – \$150
- Guest Name: \_\_\_\_\_ – \$150

**STEP FIVE: Total Fees**

Funds MUST be submitted from a U.S. bank in U.S. funds.

- Total Registration Fee (from Step 3) \$ \_\_\_\_\_
- Total Guest/Child registrations (from Step 3) \$ \_\_\_\_\_
- Total Special Events/Single Day (from Step 4) \$ \_\_\_\_\_
- Total Payment Enclosed \$ \_\_\_\_\_  
(Payment is due with the registration form.)

**STEP SIX: Payment Information**

- Register online by credit card  
*Please note there will be a 3% fee added to these costs if registering online*
- Check enclosed (make checks payable to TLA in U.S. currency drawn on a U.S. bank.)  
Check number \_\_\_\_\_  
Please complete this form and submit it with a check to:  
TLA  
529 14th Street, NW, Suite 1280  
Washington, DC 20045  
Email a scanned copy of the form to  
tla-info@kellencompany.com

**Cancellation Policy:** A \$200 cancellation fee will be assessed on registrations cancelled from March 8 through April 8, 2024. After April 8, cancellations will not be accepted. Substitutions of the same member type will be allowed, but must be requested in writing no later than April 19, 2024 to tla-info@kellencompany.com.

\*\$350 of the non-member registration fee will pay for your TLA membership from April 1, 2024 through July 31, 2025, if you meet the membership qualifications, entitling you to attend the Annual Business Meeting as a voting member upon review and approval of membership by the Membership Committee. A member application will be sent to you for completion.

\*\*Guest/Child registrations include the Welcome Reception, daily breakfast, Friday and Saturday Evening events.

\*\*\* Dine Around meals are at the expense of the registrant and not included in the registration fee.