



**Texas City Attorneys Association Summer Conference
Registration
June 12 – 14, 2024
The Isla Grand Beach Resort, South Padre Island**

Please mail the accompanying form with payment (check only) to:
TML Administrative Services
1821 Rutherford Lane, Suite 400
Austin, TX 78754-5128

You may copy this form as needed for additional registrations.

	Early (March 25-May 20)	After May 20
Members	\$399	\$419
Non-Members	\$439	\$459

Registration Fee: Your registration fee includes tuition, online handouts, access to the Wednesday and Thursday evening receptions, breakfast on Thursday and Friday, refreshment breaks, and an attendee gift.

Wednesday Night Welcome Reception: Hosted by Bickerstaff Heath Delgado Acosta, LLP. We are happy to allow you to bring one guest with you to the reception. If you plan to bring any additional guests over the age of 7, you will be charged \$15 for each. Please indicate how many additional guests you will bring (NOTE: Payment for additional guests **will not** be accepted onsite).

Thursday Reception: Hosted by Taylor, Adkins, Olson, Sralla & Elam, L.L.P. This year, each attendee is invited to bring one guest with them to the reception.

Cancellation and Substitution Policy: A \$45 registration cancellation fee will be assessed on all registration cancellations. Only **written cancellations received prior to May 31, 2024**, will be honored. Telephone cancellations will not be accepted. You may send cancellations by email to acct@tml.org. If the registrant is unable to attend, the registrant may send a substitute.

Questions: Please call Miguel Martinez, Legal Assistant, at 512-231-7424, or e-mail him at miguel@tml.org.

Confirmations/Badges: If an e-mail address is provided, you will receive an e-mail confirmation of your payment. You may pick up your badge at registration.

Please print or type your registration information below.

Full Name: _____

Badge Name: _____

Title: _____

City/Organization: _____

Address: _____

City, State, Zip _____

Phone: _____

E-mail: _____

Registration Fee (\$399-member, \$439-non-member through May 20. After May 20, \$419-member, \$459-non-member): _____

Wednesday Night Reception:

I will/will not (please circle one choice) attend.

If attending, I will/will not (please circle one choice) bring one guest at no charge.

In addition, I will be bringing _____ additional guests at \$15 each, for a total of \$_____.

Guest name(s): _____

Thursday Night Reception:

I will/will not (please circle one choice) attend.

If attending, I will/will not (please circle one choice) bring one guest at no charge.

Guest name: _____

Total amount remitted: \$_____