

Registration Form
42nd Annual Heckerling Institute on Estate Planning • Orlando World Center Marriott Resort
January 14-18, 2008

CONTACT INFORMATION

Name _____
 Name on Badge _____
 Firm _____
 Mailing Address _____

 City _____ State _____ Zip _____
 Telephone _____
 Email _____

Omit name from printed registration list First-time registrant
 University of Miami School of Law Alumni: J.D. or LL.M.

REGISTRATION FEES

Fee includes one set of materials, reception and continental breakfasts

- \$900 Regular Registration
- \$450 Full-Time Law School Faculty Registration
 Faculty at: _____

Materials (Please choose **ONLY ONE**. If you do not choose, you will automatically receive the CD-ROM)

- Printed Materials **or** CD-ROM (included in fee)
 Printed Materials **and** CD-ROM (additional fee of **\$200**)

Guest Programs (Refunds are not available for guest programs)

- \$20 Additional Reception Ticket(s) x _____
 Guest name(s) _____
- \$20 Day at SeaWorld x _____
 Guest name(s) _____
- \$90 Indian River Lagoon Eco Tour x _____
 Guest name(s) _____
- \$20 Outlet Mall Shopping x _____
 Guest name(s) _____

Registration Fee \$ _____
 Additional Materials \$ _____ *limit one*
 Reception Ticket(s) \$ _____
 Guest Program(s) \$ _____
Total Payment \$ _____

PAYMENT INFORMATION

Make checks payable to the University of Miami School of Law or charge to:

- Visa MasterCard American Express Discover

Card Number: _____
 Expiration Date: _____ Billing Zip Code: _____
 Name on Card: _____
 Signature: _____
(required for all charges)

CONCURRENT SESSIONS

Our Special Sessions, including the Financial Assets Series and the Litigation Series, will be held on Wednesday and Thursday afternoons. The first Fundamentals Program will be an optional pre-conference session on Monday morning. The other two Fundamentals Programs will run concurrently with the Special Sessions on Wednesday and Thursday afternoons, and you may register for **either** the Fundamentals Program **or** the Special Sessions during those times. Registration is required for these sessions.

WEDNESDAY AFTERNOON:

- I-A I-B I-C I-D I-E I-F

AND

- II-A II-B II-C II-D II-E II-F

OR

- Wednesday Fundamentals Program

THURSDAY AFTERNOON:

- III-A III-B III-C III-D III-E III-F

AND

- IV-A IV-B IV-C IV-D IV-E

OR

- Thursday Fundamentals Program

CONTINUING EDUCATION CREDIT

Primary Profession (please choose at least one):

- Attorney State(s) _____
 Accountant State(s) _____
 Insurance State(s) _____
 CFP Trust Officer Investment Advisor
 Educator Paralegal Other _____

Return completed form with payment to:

Heckerling Institute on Estate Planning
University of Miami School of Law
1311 Miller Drive, Room C-423
Coral Gables, Florida 33146

or fax to: 305-284-6752

PLEASE DO NOT SEND BY BOTH FAX AND MAIL

CANCELLATION FEE: \$75

NO REFUNDS after December 28, 2007

For more information:

305-284-4762 or www.law.miami.edu/heckerling

For administrative use only

Payment: check # _____ auth. # _____

Registered: _____