

Expert Interaction: Point and Counterpoint

WEBINAR VIA ZOOM • MAY 20-22, 2021

INFORMATION FOR REGISTRANT LIST IN CONFERENCE PACKET. (Please print or type.)

FIRST NAME	MIDDLE INITIAL	LAST NAME	HIGHEST DEGREE & CREDENTIALS
PROFESSIONAL TITLE		COMPANY NAME	
ADDRESS		CITY	
STATE/PROVINCE		ZIP/POSTAL CODE	COUNTRY (if not U.S.)
OFFICE #	CELL # <input type="checkbox"/> CHECK IF YOU <u>DON'T</u> WANT THIS NUMBER PUBLISHED IN THE LIST OF ATTENDEES.	FAX #	<input type="checkbox"/> CHECK IF YOU <u>DON'T</u> WANT THIS NUMBER PUBLISHED IN THE LIST OF ATTENDEES.

E-MAIL

[Click here](#) for Conference webpage.

Attendees will need a personal computer or laptop and a strong Internet connection.

Check all boxes for which CEU's are requested: ☐ ABVE ☐ CDMS ☐ CEA/CRE ☐ CLCP ☐ CRC ☐ CVE

To qualify for the 'AREA member' registration rate, you must be an AREA member or applicant* at the time of registration.

*Complete a membership application and include full payment herewith (\$175 Professional; \$175 Associate; \$25 Student).

10% discount off 1st year membership dues available for 1st time members only.

☐ Yes, I am applying for membership.

[Click here](#) for membership info.

REGISTRATION

	MAIN CONFERENCE		BOOT CAMP		COMBINED CONFERENCE/ BOOT CAMP		'FRIEND OF THE ASSOCIATION' SPONSORSHIP	TOTAL FEE
	Early-Bird		Early-Bird		Early-Bird			
Cash/Money Order:	4/1-5/10	5/11-5/22	4/1-5/10	5/11-5/22	4/1-5/10	5/11-5/22		
AREA Member*	<input type="checkbox"/> \$325	<input type="checkbox"/> \$350	<input type="checkbox"/> \$175	<input type="checkbox"/> \$200	<input type="checkbox"/> \$450	<input type="checkbox"/> \$500	<input type="checkbox"/> \$250	\$ _____
Non-Member	<input type="checkbox"/> \$375	<input type="checkbox"/> \$400	<input type="checkbox"/> \$200	<input type="checkbox"/> \$225	<input type="checkbox"/> \$500	<input type="checkbox"/> \$550		
	Early-Bird		Early-Bird		Early-Bird			
PayPal/Credit Card:	4/1-5/10	5/11-5/22	4/1-5/10	5/11-5/22	4/1-5/10	5/11-5/22		
AREA Member*	<input type="checkbox"/> \$335	<input type="checkbox"/> \$360	<input type="checkbox"/> \$181	<input type="checkbox"/> \$206	<input type="checkbox"/> \$463	<input type="checkbox"/> \$515	<input type="checkbox"/> \$258	\$ _____
Non-Member	<input type="checkbox"/> \$386	<input type="checkbox"/> \$412	<input type="checkbox"/> \$206	<input type="checkbox"/> \$232	<input type="checkbox"/> \$515	<input type="checkbox"/> \$566		

Circle Method of Payment:

Check M.O. PayPal C.C.

Please select your preferred Boot Camp below:

☐ **INTERMEDIATE**— "Estimating Personal Injury & Wrongful Death Injuries:
Making the Calculations and Critiquing an Opposing Expert's Work"

☐ **ADVANCED**— "Assessing Damages from Both Sides: Applications Through Case
Studies, including Matters Involving Injury to Self-Employed Individuals"

PAYMENT INFORMATION Make checks and money orders payable to "AREA." [CLICK HERE](#) to pay fees by credit card.

Refund Policy: CANCELLATIONS must be requested *in writing* and emailed to the AREA office *for receipt* according to the following schedule:

Full Refund for Cancellations rec'd on or before May 10. • Refund less \$100 rec'd on or before May 14. • No Refunds after May 14. • No Refunds for No-Shows.

Step 1: EMAIL OR FAX COMPLETED REGISTRATION FORM TO: area@gasvcs.net • FAX 619.839.3817

Step 2: MAIL YOUR CHECK OR MONEY ORDER TO: "AREA," PO BOX 19941, SAN DIEGO, CA 92159
or PAY ONLINE THROUGH PAYPAL.

QUESTIONS ABOUT REGISTRATION? 800.317.2732 • 619.440.2650 • area@gasvcs.net