

Registration Form

Please fill out this registration card and return by **Nov. 29, 2004**

Name: _____

Title: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-mail: _____

CLE credit desired (please circle): YES NO

3 CLE credits available.

Please be sure to sign in for CLE credit on each day of the conference.

Meals:

Lunch on Wednesday, December 8 (please circle): YES (\$20) NO

Lunch selection (please circle): Vegetarian Non-Vegetarian

Dinner on Wednesday, December 8 (please circle): YES (\$35) NO

Dinner selection (please circle): Vegetarian Non-Vegetarian

(Please make checks payable to Saint Louis University)

If you have special needs addressed by the American with Disabilities Act,
please notify us at least two weeks prior to the conference.

Send All Registration Information by **November 29 to:**
Saint Louis University School of Law

Consumer Lending Conference

Attn: Dianne Morris

3700 Lindell Blvd. • St. Louis, MO 63108

Fax: 314-977-3333 • Web site: law.slu.edu/conf/lending

For more information call (314) 977-2789 or

E-mail morrisd@slu.edu