



2025 Fall Conference

October 15-17, 2025

Stein Eriksen Lodge – Park City, UH

Name (as it should appear on name badge)

Spouse/Companion Name (as it should appear on badge)

Firm/Company

Address

City State Zip

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Office Cell

Email Address

PAYMENT INFORMATION

☐ Enclosed is a check for \$ _____
made payable to PLAC

☐ Please charge \$ _____ to

☐ Visa ☐ MasterCard
☐ American Express

Card #: _____

CCV #: _____ Exp. Date: _____

Billing Address: _____

Name on Card: _____

Signature: _____

MEMBER REGISTRATION FEES

	<u>Until 7/3</u>	<u>Until 9/12</u>	<u>After 9/12</u>
Corporate	<input type="checkbox"/> Free	<input type="checkbox"/> Free	<input type="checkbox"/> Free
Sustaining	<input type="checkbox"/> \$1,195	<input type="checkbox"/> \$1,295	<input type="checkbox"/> \$1,395
Future Leader	<input type="checkbox"/> \$995	<input type="checkbox"/> \$1,095	<input type="checkbox"/> \$1,195

GUEST ATTENDEE REGISTRATION FEES

Guest Attendee	<input type="checkbox"/> \$1,395	<input type="checkbox"/> \$1,495	<input type="checkbox"/> \$1,595
Spouse/ Companion	<input type="checkbox"/> \$250	<input type="checkbox"/> \$300	<input type="checkbox"/> \$350

OPTIONAL EVENTS

Please visit the conference website for a complete list of optional activities and events including descriptions and registration details.

SEND PAYMENT

By Fax: (703) 264-5301

By Mail: Product Liability Advisory Council (PLAC)
Attn: Conference Registration
5746 Union Mill Rd, #592
Clifton, VA 20124

CANCELLATION POLICY

To cancel a registration, please send a written request to PLAC at plac@plac.com. A full refund will be provided only for written requests received on or before September 12, 2025. **NO REFUNDS WILL BE GIVEN AFTER SEPTEMBER 12**, but your registration may be transferred to another attorney at your firm with approval from PLAC.

EMERGENCY CONTACT INFORMATION

Please provide us with information for the person we should contact in case of an emergency.

Name

Telephone Number