REGISTRATION FORM AND GENERAL INFORMATION QUESTIONNAIRE

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Texas College of Probate Judges, Corpus Christi, May 23-24, 2024

With 2-hour Add-On Session, May 22, 2024
Omni Corpus Christi Hotel

900 North Shoreline Blvd., Corpus Christi, TX 78401

Please type or print clearly and answer all questions.



A separate page 1 of this registration form must be filled out <u>by each person</u> attending the conference. If you are sending one check to cover multiple registrations, you may send in only one page 2 of the registration form.

Name		Phone ()
County	Title		
Mailing Address			
Email address			
I am registering for the following ☐ 2-day workshop, May 23 & 24 ☐ Optional Add-On Session on We *Note that even if you don't sign up for the We please check if you know you are coming so we	Please note this wo	4:00-6:00 p.m.* nay attend it if you are regist	·
Is this your first <i>Texas College of Probat</i> Please check appropriate boxes:	te Judges Conference N al County Court t at Law exercising pobate Court ct Clerk (or both)	ce attended? Yes orobate jurisdiction	No 🗆
☐ For lunch, I would like the vertice in For lunch, I would like the glasse indicate years of service in your or District Clerk, in the Clerk's Office, or ☐ I have read and agree with the service in the clerk's Office, or ☐ I have read and agree with the clerk's Office.	uten-free option position: I have r as Court staff.	 ,	e on the bench, as a County

Registration form continues on page 2.

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Cost for 2-day workshop:

\$425.00 per person if the registration form is <u>received</u> by Friday, May 10. \$450.00 per person if the registration form is received after Friday, May 10.

Cancellation policies:

- Cancellations made **on or before Wednesday, May 8,** can get a full refund of the registration fee.
- Cancellations made after Wednesday, May 8, but before Saturday, May 18, are subject to a \$100 administration fee, but the rest of the registration fee will be refunded.
- If a cancellation is made after Friday, May 17, the registration fee will be forfeited (although you will still receive the conference materials).

1.	. Payment amount; mark the appropriate box and fill in the amount of the check:						
	\square I have enclosed a check in the amount of \S	to cov	cover the registrations indicated below.				
	□ I have requested that our auditor send TCPJ a check in the amount of \$ to cover the registrations indicated below. Note: If you are sending a registration form to your auditor with your reques for a check, you may want to also email us a copy of the registration form to ensure we receive your registration by the deadline, even if the check will arrive after the deadline. Email to TCPJconference@gmail.com .						
	Make check payable to "Texas College of Prob	te Judges." TCPJ doe	es not accept credit card	ds at this time.			
2.	This payment covers (#) registration	ons. (Please indicate	e the total number of re	egistrations.)			
3.	Be sure to enclose a <u>separate</u> page 1 of the registration form for each person registering.						
Signature			Date				
Pri	inted name						
	uestions? For the quickest response, email TC	PJconference@gmai	<mark>l.com</mark> . You may also ca	ıll us at 512-480-			

Mail registration form(s) and check(s) to:

(Or, if check is to follow, you may scan and email registration form(s) to <u>TCPJconference@gmail.com</u>)

Texas College of Probate Judges, P.O. Box 2025, Austin, Texas 78768