

ASSOCIATION OF BUSINESS TRIAL LAWYERS



SEPTEMBER 17, 2019

DINNER AND PROGRAM

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*100 YEARS AFTER WOMEN'S RIGHT TO  
VOTE: WHERE ARE WE NOW?*

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***Susan Estrich***

USC Law School  
Boies Schiller Flexner LLP



***Gail Heriot***

University of San Diego, School of Law



***Hon. Suzanne Segal***

United States District Court  
Moderator

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**Millennium Biltmore Hotel**

506 S. Grand Avenue, Los Angeles, CA

Wine Reception: 6:00 p.m.;

Dinner and Program: 7:00 p.m.— 9:00 p.m.

Cost: 2019 ABTL Members \$100, Non-Members \$125

Active Judiciary: Complimentary

Tables of 10 Members Cost: \$950; Tables of 10 Non-Members Cost: \$1,100

1.25 hours of MCLE credit will be offered.

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**SIGNATURE**

RESOLUTION

**Daily Journal**  
CORPORATION

**ASSOCIATION OF BUSINESS TRIAL LAWYERS**  
**PROGRAM REGISTRATION FORM**  
**September 17, 2019 Dinner Program—Women’s Right to Vote**

*Please check the appropriate box*

- ABTL Member..... \$100.00
- Non-Member ..... \$ 125.00
- Member—table of 10..... \$950.00
- Non-member—table of 10 .....\$1,100.00
- Active Judiciary ..... Complimentary
- Please enroll me in ABTL for 2018.....\$ 95.00

**\*\*Visit us on-line for young lawyer and group discounts**

**RESERVATIONS:** When making a reservation after Friday, September 13, 2019, prior to mailing, please pdf a copy of this registration form to [abtl@abtl.org](mailto:abtl@abtl.org).

**CANCELLATION AND REFUNDS:** Written notice of cancellation is required by noon on Friday, September 13, 2019 for refunds; registration is transferable.

**ON SITE:** Please check in at the registration tables. All reservations will be held by last name.

Event Location: Millennium Biltmore Hotel, 506 S. Grand Avenue, Los Angeles CA

Please include a list of attendees' names and bar numbers with all table reservations.

To ensure nametags, all names must be emailed to [abtl@abtl.org](mailto:abtl@abtl.org) by 3:00 p.m. the previous day.

Mail your registration and check made payable to the ABTL to the address below.

FIRM: \_\_\_\_\_

ATTENDEE NAMES AND BAR NUMBERS:

- (1) \_\_\_\_\_(2) \_\_\_\_\_
- (3) \_\_\_\_\_(4) \_\_\_\_\_
- (5) \_\_\_\_\_(6) \_\_\_\_\_
- (7) \_\_\_\_\_(8) \_\_\_\_\_
- (9) \_\_\_\_\_(10) \_\_\_\_\_

**\*\* For nametag purposes, please note company/firm name if attendee is not otherwise affiliated with purchasing firm.**

**\*\*Please note if vegetarian meal is desired and which attendee is making the request.**

CONTACT NAME FOR CONFIRMATION: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

Total Enclosed: \$ \_\_\_\_\_; Payment via check \_\_\_\_\_; Payment via Credit Card: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Type of Card \_\_\_\_\_; Number: \_\_\_\_\_; Expiration: \_\_\_\_\_

Signature: \_\_\_\_\_; Security Code: \_\_\_\_\_

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