

2013 National CLE Conference® in Snowmass, Colorado

DISCOUNT SKI LIFT TICKET ORDER FORM



Order by Fax...

when using VISA or MasterCard
Fax: (303) 860-0624



Or MAIL Form to...

CBA-CLE
1900 Grant Street, Suite 300
Denver, CO 80203-4303

Decription	# of Days	Snowmass Advanced Purchase Pricing	Special LEI Discount	# of Tickets	Total Price
Adult Lift Ticket					
	1-day	\$98	\$89	x \$89	
	2-days	\$196	\$176	x \$176	
	3-days	\$291	\$259	x \$259	
	4-days	\$384	\$344	x \$344	
	5-days	\$470	\$421	x \$421	
	6-days	\$552	\$492	x \$492	
	7-days	\$644	\$565	x \$565	
Child Lift Ticket (7-12)					
	1-day	\$66	\$55	x \$55	
	2-days	\$128	\$110	x \$110	
	3-days	\$189	\$160	x \$160	
	4-days	\$248	\$209	x \$209	
	5-days	\$300	\$251	x \$251	
	6-days	\$348	\$291	x \$291	
	7-days	\$406	\$340	x \$340	
Total Ticket Price					\$

* PRICES SUBJECT TO CHANGE AFTER 12/24/12

** THESE TICKETS ARE NOT REFUNDABLE WITHOUT A WRITTEN MEDICAL STATEMENT FROM A PHYSICIAN.**
THERE WILL BE NO EXCEPTIONS. They may be used only during the period of January 2 through January 12, 2013.

PLEASE PRINT!!

Name: _____

Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email: _____

Program Registered for: _____ Reservations at (check one): Westin _____ Other _____

When are you arriving? _____

Check enclosed made payable to "CBA-CLE" VISA MasterCard AMEX

CC# _____ Exp. Date: _____

Signature: _____

(Required for all credit card orders.)

All orders must include a check or charge card information

CLE Use Only: Check Number: _____ Approval Number: _____