



APRIL 20-21, 2021

FEATURING



THOM TILLIS
U.S. Senator for
North Carolina



DAREN TANG
Director General,
World Intellectual
Property Organization

IPO Member Group Discount Registration Form

Once an IPO member organization has 5 paying attendees from the same organization, additional attendees can register for free. Enter the five paying attendees below. Email confirmations will be sent to their email addresses once they are processed.

NAME _____

TITLE (i.e. *Vice President*) _____

ORGANIZATION _____

ADDRESS _____

CITY, STATE/COUNTRY (if outside USA) and POSTAL CODE _____

PHONE _____ E-MAIL _____

If requesting CLE credit, enter your state(s) and bar number(s) (i.e. TX 123456, NY 123456, IL 123456)

NAME _____

TITLE (i.e. *Vice President*) _____

ORGANIZATION _____

ADDRESS _____

CITY, STATE/COUNTRY (if outside USA) and POSTAL CODE _____

PHONE _____ E-MAIL _____

If requesting CLE credit, enter your state(s) and bar number(s) (i.e. TX 123456, NY 123456, IL 123456)

NAME _____

TITLE (i.e. *Vice President*) _____

ORGANIZATION _____

ADDRESS _____

CITY, STATE/COUNTRY (if outside USA) and POSTAL CODE _____

PHONE _____ E-MAIL _____

If requesting CLE credit, enter your state(s) and bar number(s) (i.e. TX 123456, NY 123456, IL 123456)



NAME _____

TITLE (i.e. *Vice President*) _____

ORGANIZATION _____

ADDRESS _____

CITY, STATE/COUNTRY (if outside USA) and POSTAL CODE _____

PHONE _____ E-MAIL _____

If requesting CLE credit, enter your state(s) and bar number(s) (i.e. TX 123456, NY 123456, IL 123456)



NAME _____

TITLE (i.e. *Vice President*) _____

ORGANIZATION _____

ADDRESS _____

CITY, STATE/COUNTRY (if outside USA) and POSTAL CODE _____

PHONE _____ E-MAIL _____

If requesting CLE credit, enter your state(s) and bar number(s) (i.e. TX 123456, NY 123456, IL 123456)

IPO Group Member Registration Fee: \$200 per registrant for the first (5) paying registrants = \$1,000 USD.

Method of Payments:

_____ Check here if paying via wire. We will send you an invoice with the WIRE information. Registrations will be processed once payment is received.

Enter payment information below if paying with a credit card:

American Express # _____

Visa # _____

MasterCard # _____

Discover # _____

Exp. Date _____ Security Code: _____

Print Cardholder's Name _____

Cardholder's Signature _____

RETURN COMPLETED FORM TO MEETINGS@IPO.ORG

Allow up to 2 business days to receive a confirmation email.

By submitting this form, each registrant must read and agree with [IPO's meeting and cancellation policies](#).