

REGISTRATION FORM

**NORTH PENN LEGAL SERVICES SEMINAR
MARCH 18, 2010**

3 Substantive CLE Credit Hours

Split Rock Lodge – Lake Harmony, PA

Name: _____

Attorney ID #: _____ **Telephone #:** _____

Office Address: _____

By attending this course, I agree to accept a pro bono referral from
North Penn Legal Services over the next year.

Mail Form to:
NORTH PENN LEGAL SERVICES
SUITE 410, 15 PUBLIC SQUARE
Wilkes-Barre, PA 18701
Attn: Betty Abraham

(Include check made payable to: North Penn Legal Services
if applicable).

DEADLINE: MARCH 16, 2010