

A WEEK IN LEGAL LONDON

Participant and Guest Registration Form

September 29 - October 4, 2019

I. FIRST REGISTRANT ☐ Please register me as a Full Program Participant in A Week in Legal London.

Name: _____ State Bar # _____

Firm/Office: _____

Address: _____

City/State/Zip Code: _____

Phone: _____ Cell: _____

Email: _____

II. SECOND REGISTRANT or GUEST (optional) ☐ Please register me as ☐ a Guest or ☐ a Full Program Participant

Name: _____ State Bar # _____

Firm/Office: _____

Address: _____

City/State/Zip Code: _____

Phone: _____ Cell: _____

Email: _____

III. REGISTRATION FEE SUMMARY:

Fees are determined on when you register. Save money by registering early. Participants will have 30 days to complete payment.

Fees	before 3-31-19	4-1-19 to 6-30-19	after 6-30-19
Full Program Participant	\$3,895.00	\$4,095.00	\$4,295.00
Guest Program Participant	\$1,395.00	\$1,495.00	\$1,595.00

TOTAL REGISTRATION FEE(S) enclosed or to be charged = \$ _____

IV. REGISTRATION PAYMENT

You will receive an email invoice following the receipt of your registration form. That email will include an invitation to a secure, online portal, where you can enter your credit card payment.

Or, if you prefer, you can send a check payment, payable to Mosaic Event Management to:

Legal London Registration
c/o Mosaic Event Management
67 Haight Street, San Francisco, CA 94102

V. HOTEL RESERVATION

The MAY FAIR HOTEL has been selected as the host hotel for A Week in Legal London.

We have obtained the special rate of £315 per night for single occupancy, or £340 for double occupancy in the KING SUPERIOR ROOM category. Upgraded room types and rates are available. If interested, please contact Michelle McFadden for details.

This rate is INCLUSIVE of VAT, full English breakfast in the hotel restaurant, hotel service charges, guest room Internet.

Group room rates are available three (3) days before and after program dates.

A. ☐ Please make the following reservation at The May Fair Hotel:

Arrival Day & Date: _____ Departure Day & Date: _____

☐ Single Room: Total number of nights _____ @ £315 per night = £ _____ (GBP)

☐ Double Room: Total number of nights _____ @ £340 per night = £ _____ (GBP)

☐ Contact me about updated room types and rates

B. ☐ I will not need accommodations at The May Fair Hotel. I will stay at: _____

VI. HOTEL PAYMENT

In order to finalize your reservation, the hotel will require a credit card on file. You can expect to receive a secure, online request to submit your card information directly to The May Fair Hotel.

VII. WAIVER

California Lawyers Association requires all participants and guests to sign the included waiver in order to participate in the Week in Legal London program. You may submit your signed waiver by email (mmcfadden@mosaicevents.com) or fax (415-908-2651).

PLEASE COMPLETE AND MAIL OR FAX TO:

Mosaic Event Management, Inc.

Legal London Registration

67 Haight Street

San Francisco, CA 94102

Legal London Registration

FAX: 415-908-2651

Make checks payable to: **Mosaic Event Management**

PHONE: 415-848-7815

EMAIL: mmcfadden@mosaicevents.com

If you have any questions or require additional information, please contact Michelle McFadden at Mosaic Event Management, 415-848-7815

FEES

CALIFORNIA LAWYERS ASSOCIATION
Litigation Section

Please sign and fax back to (415) 908-2651, or email mmcfadden@mosaicevents.com

A Week in Legal London, September 29-October 4, 2019

Release of Liability, Waiver of Rights, and Assumption of Risks Agreement

As consideration for being permitted to participate in the California Lawyers Association (“CLA”) 2019 Litigation Section “A Week in Legal London” from September 29 – October 4, 2019 (hereinafter “Program”), I, the undersigned, hereby voluntarily and of my own free will agree to the terms and conditions of this Release of Liability, Waiver of Rights, and Assumption of Risks Agreement (“Release and Waiver”) as set forth below:

I acknowledge that I am the best judge of my own capacity and level of health and wellness to determine whether I should participate in the Program. I further acknowledge that I am willingly and voluntarily participating in the Program, my participation is in no way required by CLA as a result of my membership, and I am participating on a strictly voluntary basis in an individual capacity.

Release of Liability and Waiver of Rights: By signing below, I, the undersigned, hereby release, and forever discharge CLA and Mosaic Event Management (“Mosaic”), their Board of Representatives, officers, sections, committees, agents, employees, representatives, volunteers, contractors, and assignees from and against any and all injuries (including death), liability, claims (including negligence claims), suits, charges, claim for costs, damages, demands, obligations, acts, omissions, misfeasance or malfeasance, expenses (including attorneys’ fees and costs), actions, and causes of action and otherwise of every type, nature, kind, or description whatsoever (collectively, “Claims”) whether in law or in equity, known or unknown, suspected or unsuspected, or foreseen or unforeseen, of any kind of nature whatsoever, of or to me, my property, or any other person, directly or indirectly arising from or in connection with: (1) my participation in the Program; (2) any travel or accommodations related thereto; and (3) the use of my Personal Attributes (defined below) including any and all Claims for invasion of any rights of privacy, violation of right of publicity, physical or emotional injury or distress, infringement, libel, defamation, misappropriation or misuse of image, or any similar cause of action in tort, contract or any other legal theory arising directly or indirectly from use of the Materials (also defined below); even if caused by the negligent act or omission of CLA/Mosaic.

I hereby further forever waive and fully relinquish any right to sue or any other claims or demands that I may have against CLA/Mosaic, arising out of or in conjunction with my participation in, or travel to, during, or from the Program. I agree to this Release and Waiver, whether any right or claim hereby relinquished arises due to the negligence or other fault of the CLA/Mosaic and/or any third party, whether due to dangerous or defective condition of any property, facilities, or equipment, or whether the CLA/Mosaic is subject to liability arising without fault.

I hereby expressly waive my rights under Section 1542 of the Civil Code of the State of California which states: **“A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS WHICH THE CREDITOR DOES NOT KNOW OR SUSPECT TO EXIST IN HIS OR HER FAVOR AT THE**

CALIFORNIA LAWYERS ASSOCIATION
Release and Waiver

TIME OF EXECUTING THE RELEASE, WHICH IF KNOWN BY HIM OR HER MUST HAVE MATERIALLY AFFECTED HIS OR HER SETTLEMENT WITH THE DEBTOR.”

Assumption of Risk: My choice to participate in the Program is knowing, voluntary, and made for my personal enjoyment. I understand that participation in the Program carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but include inherent risks and dangers of accidents, rescue operations, emergency treatment, property loss or damage, serious personal and bodily injury, death, and severe personal and economic losses. These may result not only from my own actions, inactions, or negligence, but also from the action, inactions, or negligence of others, or the condition of the facilities, equipment, or vehicles. Further, I understand there may be other risks not set forth above and not known to me or reasonably foreseeable at this time and **I HEREBY KNOWINGLY AND VOLUNTARILY ASSUME ANY AND ALL RISKS OF BODILY INJURY, PERSONAL INJURY, DEATH, AND PROPERTY DAMAGE OR LOSS WHICH MAY OCCUR DURING OR AS A RESULT OF MY PARTICIPATION IN THE PROGRAM, OR MY TRAVEL TO OR FROM THE PROGRAM, WHEREVER OR HOWEVER SAID INJURY, DAMAGE, OR LOSS MAY OCCUR, EVEN THOUGH AT THIS TIME I DO NOT KNOW EXACTLY HOW EXTENSIVE ANY INJURY, LOSS, OR DAMAGE MIGHT BE.**

Indemnification and Hold Harmless: I will defend, indemnify, and hold harmless CLA and Mosaic, their Board of Representatives, officers, sections, committees, agents, employees, representatives, volunteers, contractors, and assignees, from any and all liabilities, losses, demands, damages, claims, costs or expenses (including attorneys’ fees and costs) resulting from or arising out of my participation in the Program or any travel or accommodations related thereto. I further agree to reimburse CLA/Mosaic for any and all costs and expenses incurred (including attorneys' fees, costs and expenses) in connection with enforcing this indemnity provision, and if anyone makes a claim against CLA/Mosaic in connection with my participation in the Program.

Medical Expenses: I hereby consent to receive medical treatment which may be deemed necessary in the event of any illness, accident, or injury, or medical emergency resulting from or in connection with my participation in the Program and understand that I am solely responsible for all costs related to such medical treatment, medical transportation, and/or evacuation.

Publicity.

Permission to Take and Use Visual/Audio Images of Me. I hereby authorize CLA and Mosaic, their employees, representatives, contractors, and agents to take and use visual/audio images of me in connection with my participation at the Program. Visual/audio images are any type of recording, including but not limited to photographs, digital images, drawings, renderings, voice recordings, sounds, video recordings, audio clips, or accompanying written descriptions.

Rights Granted to CLA

- I hereby grant to CLA the perpetual and irrevocable rights to use my name, likeness, identity, image, voice, oral or recorded statements, appearance, professional and personal biographical information and other personal attributes (collectively, “Personal Attributes”), as such may be embodied in any visual/audio images taken by or on behalf of CLA.

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- I hereby grant CLA the perpetual and irrevocable rights to display, publicly perform, reproduce, record, photograph, modify, create derivative works, license, and otherwise use my Personal Attributes, and all materials created by or on behalf of CLA and Mosaic incorporating any of the foregoing ("Materials") in any medium or format whatsoever, now existing or later created, for any purpose without further consent from, or any royalty or other compensation to, me. These uses include, but are not limited to, videos, publications, advertisements, news releases, Web sites, and any promotional or educational materials.
- I agree that CLA is the exclusive owner of such Materials and all rights related to them. I hereby irrevocably transfer and assign to CLA my entire right, title and interest, if any, in and to the Materials. There is no time limit on this Publicity Release and Waiver nor is there any geographic limitation on where these Materials may be distributed, published, or used.
- I understand that the Materials including my Personal Attributes may be edited, copied, exhibited, published, or distributed and that I have no right to review or approve the Materials before they are used. Any credit or acknowledgment of me will be determined by CLA in its sole discretion. CLA has no obligation to create or use the Materials.

Miscellaneous. No modification of this Release and Waiver shall be of any effect unless it is made in writing and signed by all of the parties hereto. This Release and Waiver is governed by the laws of the State of California. I expressly agree that the foregoing Release and Waiver is intended to be as broad and inclusive as is permitted by the laws of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This Release and Waiver shall be binding upon and enforceable against me, my personal representatives, spouse, assigns, heirs, and next of kin without limitation. This document constitutes the entire agreement on the subject matter contained herein between CLA, Mosaic and me, and supersedes any previous or contemporaneous discussions or agreements between us in respect of these matters.

Acknowledgment of Understanding: I have read this Release and Wavier and fully understand the terms. **I understand that I am giving up substantial legal rights.** I acknowledge that I am signing this Release and Waiver freely and voluntarily, and **intend by my signature for this Release and Waiver to be a complete and unconditional release of all liability** to the greatest extent allowed by law. I am an adult, 18 years or older, and I have read and understand this Release and Waiver and I freely and knowingly give my consent to CLA and Mosaic as described herein.

By: _____
(Name printed)

(Signature)

Date: _____