

Criminal Defence Advocacy Skills Workshop
A Case in Real Time: How to Achieve Success with Every Step You Take

April 13, 2019 | 9:00 AM - 4:00 PM
Law Society of Manitoba Classroom
3rd Floor – 260 St. Mary Avenue, Winnipeg

COURSE MATERIALS:

Course material will be sent to you prior to the day of the program.

Advance preparation may be required.

INVOICES and RECEIPTS:

Invoices and receipts **will NOT be provided** unless specifically requested.

REFUND POLICY:

This is a **LIMITED enrollment program**, therefore a full refund will only be given if the spot can be filled.

Registration for all programs is **transferable** to another eligible person.

PROGRAM CHANGES:

We will make every effort to present the program as advertised but changes to speakers, content, dates and venue may be necessary. In the event of a program cancellation, our liability is limited to reimbursement of fees.

ELIGIBILITY FOR CPD HOURS:

This program may be reported for up to 6 hours of eligible CPD activity, including 1.5 hours of EPPM (Ethics, Professionalism & Practice Management).

Make cheques payable to:

Law Society of Manitoba

Email, mail or fax this form to:

Law Society of Manitoba
200 – 260 St. Mary Avenue
Winnipeg, MB R3C 0M6
Ph: 204.942.5571 Fax: 204.956.0624
Email: cpd@lawsociety.mb.ca

Registration Form

Registration includes course materials, refreshments (including lunch) and a short reception at the end of the day.

Payment **MUST** be received to confirm your spot.

NAME _____

FIRM OR ORGANIZATION _____

PHONE _____

EMAIL _____

REGISTRATION FEE

SPECIAL PRICING FOR THE MOST RECENT CALLS!

- | | |
|--|----------|
| <input type="checkbox"/> Year of Call 2016-2019 (incl. articling students) | \$200.00 |
| <input type="checkbox"/> Year of Call 2013-2015 | \$275.00 |
| <input type="checkbox"/> Year of Call 2012 or earlier | \$350.00 |

Special Dietary Requirements:

(please note if any allergies or you are vegetarian etc.)

GST Registration No. 107604357

Total _____

Plus GST (5%) _____

Amount Due _____

PAYMENT INFORMATION:

NAME ON CARD _____

VISA/MASTERCARD/AMEX # _____

EXPIRY DATE _____

SIGNATURE _____

MAKE CHEQUES PAYABLE TO:

LAW SOCIETY OF MANITOBA