



## REGISTRATION CLOSES OCTOBER 7, 2016

### **REGISTRATION INSTRUCTIONS**

Please follow these two simple steps to register:

**STEP ONE:** Complete online registration at the following link:  
<http://bcabaannualprogram2016.app.rsvpify.com/>

**STEP TWO:** **Submit Payment.** During the course of your online registration, you will be required to select your payment method.

- **To pay by credit card:**
  - Pay online through our website at:  
<http://bcaba.org/annual-meeting-materials/2016-program-payment> **OR**
  - Mail a completed Credit Card Payment Form (attached) to the address below.
- **To pay by check:** Please send a check for the registration fee to the address below.
  - If paying for a single attorney: Please either include the name of the registrant in the memo line or enclose a copy of your registration confirmation with the check.
  - If you are paying for multiple attorneys with a single check, please include a list of the attorneys covered by the payment.

BCABA, Inc.  
c/o 2016 Annual Program Registration  
P.O. Box 66612  
Washington, D.C. 20035

### Questions?

Contact Erin Sheppard or  
Katie Muldoon Griffin

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(202) 496-7533

[kgriffin@smithpachter.com](mailto:kgriffin@smithpachter.com)

(703) 883-1667

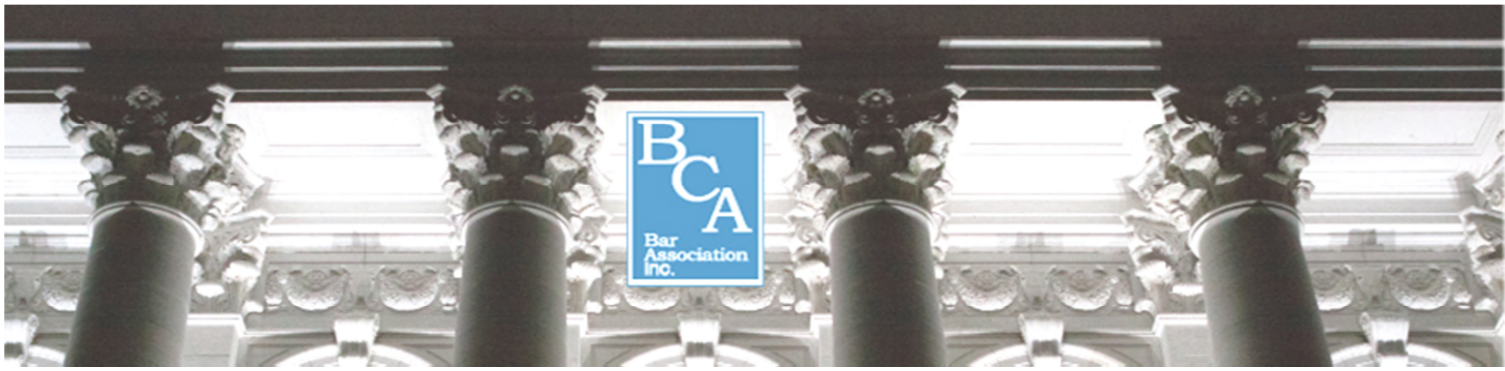
### 2016 ANNUAL PROGRAM FEES

Government Employees, Academics, Student Member	\$50
Gold Medal Firm Members	\$75
Other BCABA Members	\$100
*Non-Members	\$150

### \*Gold Medal Firms:

Firms in which all government contract attorneys were BCABA members for 2016, or those signing up all attorneys for 2017 BCABA membership are eligible for this discount.

*\*Non-Members : It is less expensive to join BCABA (\$30 for Government employees and \$45 for everyone else) and pay the Annual Program fee applicable to members. Joining now provides membership through 2017. Payments can be made at <http://bcaba.org/membership-application>. Current members, please remember to renew. The renewal period runs from September 15, 2016 through December 31, 2016.)*



## CREDIT CARD PAYMENT FORM

**DEADLINE IS OCTOBER 7, 2016**

**(1) Name & Contact information for of Registrant(s):**

Name: \_\_\_\_\_

Tel: \_\_\_\_\_

e-mail: \_\_\_\_\_

[Please attach a separate list, if necessary.]

**(2) Name on the Credit Card:** \_\_\_\_\_

**(3) Type of Credit Card (VISA/Master Card):** \_\_\_\_\_

**(4) Name of your Firm or Agency:** \_\_\_\_\_

**(5) Total Dollar Amount to be charged-breakdown:**

a. For Annual Program Registration Fee(s): \$ \_\_\_\_\_

b. For Membership Dues \$ \_\_\_\_\_

**(6) Credit Card Number:** \_\_\_\_\_

**(7) Credit Card Expiration Date:** \_\_\_\_\_

**(8) CBC (three digit) Code – on reverse of the credit card:** \_\_\_\_\_

**(9) USPS Zip Code for the location to which your card is billed:** \_\_\_\_\_

**(10) Please confirm that you have completed the annual registration at:**

<http://bcabaannualprogram2016.app.rsvpify.com/>

Yes \_\_\_\_\_ No: \_\_\_\_\_

If you prefer a hard-copy submission, please submit your completed credit card authorization form by mail to:

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