

**Registration Information**

**LOCATION/HOTEL ACCOMMODATIONS:** A limited block of rooms will be available at special rates at the site hotel (\$179 Resort View / \$209 Gulf View). To make your reservations please call 1-800-237-7600 and mention that you are with SEAK, Inc. Rooms are limited and this rate expires Friday, January 7, 2011 so you are strongly encouraged to make your reservations as soon as possible. Please see page 3 for additional information.

**CONTINUING EDUCATION CREDIT:** Please see pages 4, 7, 10 and 13 for CME information.

**SPECIAL EARLY REGISTRATION BONUS:** All persons registering prior to October 15, 2010 will receive a complimentary copy of the best-selling 52-minute DVD *The Expert Medical Deposition: How To Be An Effective and Ethical Witness* (a \$104 value). Space is strictly limited for the seminar and hotel. Register early.

**CANCELLATIONS:** Conference cancellations received in writing prior to January 15, 2011 will receive a full refund.

**MAIL to:** SEAK, Inc., P.O. Box 729, Falmouth, MA 02541 **FAX to:** 508.540.8304  
**CALL:** 508.457.1111 **or REGISTER ONLINE:** [www.seak.com](http://www.seak.com)

**PLEASE REGISTER ME FOR:**

- How to Start, Build and Run a Successful Expert Witness Practice (\$1295) February 3-4, 2011**
- How to Start, Build and Run a Successful IME Practice (\$1295) February 3-4, 2011**
- How to Start, Build and Run a Successful Disability and File Review Consulting Practice (\$1295) February 5-6, 2011**
- How to be an Effective Medical Expert Witness (\$1295) February 5-6, 2011**

**Please print or type all items to assure accuracy.**

**All confirmations will be sent via email to the individual indicated.**

**Priority Code: NET**

<input type="checkbox"/> Check here if you require special accommodations to fully participate.		
First Name (as it will appear on name badge):		
Last Name:		
Title:		
Company/Organization:		
Mailing Address:		
City:	State:	Zip:
Phone:	Fax:	
E-Mail: <b>(Please print neatly - confirmations and other information will be sent via e-mail)</b>		
<input type="checkbox"/> I've enclosed a check payable to: SEAK, Inc., P.O. Box 729 Falmouth, MA 02541		
<b>OR</b> I'm Paying by Credit Card (please circle card type) MC / Visa / Amex		
Card Number:	Exp. Date:	
Name as it appears on the card:	Security Code:	
Signature:		