

OACDL

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Oberlin College

119 W. Woodland Street
 West Lecture Hall
 Oberlin, OH 44074
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OACDL

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

(please provide email address for registration confirmation)

Seminar Cost: \$165.00 OACDL Member \$195.00 Non-member of OACDL
 \$195.00 OACDL Member Walk-In Rate \$230.00 Non-member of OACDL Walk-In Rate

Register online at www.oacdl.org and click on Seminars (to pay with credit card); or complete this registration form and mail to OACDL with either check made payable to OACDL or credit card information below. No telephone registrations accepted. Email address required to process credit card payments.

Charge my Visa MasterCard Discover in the amount of \$ _____

Card # _____

Expiration Date _____ 3 digit security code _____

Signature _____

(Cancellation must be received by the OACDL by 5:00 p.m. on Tuesday, October 22, 2013 to receive a refund.)

SERVICES FOR PERSONS WITH DISABILITIES

If special arrangements are required for individuals to participate in this seminar, please contact the OACDL at least 3 days prior to the course date at 800.443.2626.

PUBLIC DEFENDER/PRO BONO FUNDING PROVIDED BY THE OFFICE OF THE OHIO PUBLIC DEFENDER

If you have represented at least one client on a Pro Bono basis during the past year, you are entitled to attend this seminar FREE of CHARGE. You may not have used that case to attend any other seminar on a PRO BONO basis. However, any attorney, private or public defender, is limited to 2 seminars per fiscal year (July 1, 2013 to June 30, 2014) on this basis.

PRO BONO REPRESENTATION WAS PROVIDED IN THE FOLLOWING:

This is to certify that the attorney named at right provided representation for an indigent person charged with a criminal offense in my court. Further, the attorney did not submit a bill for payment for any services involved in that representation and represented the defendant on an appointed basis at no cost to the state.

All Pro Bono and Public Defenders MUST Be Pre-registered by October 11, 2013. All applications are on a first come first serve basis.

State/City _____ vs. _____

Case # _____ County _____

Date Representation Provided _____

Offense Charged _____

Judge's Name _____

Judge's Signature (required) _____

OR Public Defender Information

(do not complete if pro bono portion is filled out)

Name of Director or County Public Defender _____

County in which you serve as a public defender _____

County Public Defender's Signature (required) _____

There is limited scholarship money for Pro Bono and Public Defenders. Space is limited to the first 40 people to apply. You will receive notification via email if your registration is one of the first 40.