

# Southern California Family Law American Inn of Court Guest Application

Name \_\_\_\_\_ Date of Attendance \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Firm \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City/Zip Code \_\_\_\_\_

Method of Payment:

Enclosed is a check in the amount of \$ \_\_\_\_\_, made out to "Southern California Family Law American Inn of Court"

Charge \$ \_\_\_\_\_ to my:  Visa  Mastercard  American Express

Credit card number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ CVC/CVV: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Please return payment to:

Email to [dfrank@debrafranklaw.com](mailto:dfrank@debrafranklaw.com)

Or fax to : 310-277-5932

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