



THE TENNESSEE  
**FAITH & JUSTICE**  
ALLIANCE

**Tennessee Faith and Justice Alliance Meeting**

**Monday, April 7<sup>th</sup>, 2014**

**Please return this form to the Pro Bono Coordinator by March 24, 2014:**

Christina Magráns  
511 Union Street, Suite 600  
Nashville, TN 37219  
(615) 741-6285 (fax)  
Christina.Magrans@tncourts.gov

**Information about You:**

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

Name of House of Worship: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

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

**Information about Your Guests:**

**Please confirm with your guests that they will be able to attend the meeting prior to returning this form. Please use additional paper if necessary.**

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

Email Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

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

Is this guest an attorney:\*    YES    /    NO

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

Email Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

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

Is this guest an attorney:\*    YES    /    NO

\*Please note that we expect the program to be approved for Continuing Legal Education credits. If the attorney wishes to receive CLE credit, please advise the attorney to provide to you or bring with him/her to the meeting, a check made payable to the Administrative Office of the Courts for the nominal fee of \$15.00.