



126th Annual Convention

Park Hyatt Aviara • Carlsbad, CA

MAY 4-6, 2017

REGISTRATION: Register online at www.calbankers.com/AC17 or email registration form to registrations@calbankers.com.
Send checks to California Bankers Association, Attn: Accounting Dept—A/R, 1303 J Street, Suite 600, Sacramento, CA 95814

REGISTRATION INFORMATION

One registrant per form, type/print clearly. Your information will be published on the conference attendee list as it appears here:

Bank/Firm _____

Mr. Ms. First Name _____ Last Name _____

Position Title _____

Nick Name (for name badge) _____ Telephone _____

Email Address _____

Street Address _____

City, State, Zip _____

For Confirmation: Assistant Preparer _____

Assistant/Preparer Email Address _____

PAYMENT INFORMATION

Check payable to California Bankers Association

Credit Card Charge \$ _____ Visa MC Amex

CARD NUMBER: _____ EXP DATE: _____

Cardholder Name _____

Zip + 4 _____

Signature _____

REGISTRATION FEES

EARLY-BIRD *by April 26, 2017*

REGULAR *after April 26, 2017*

CBA Member Bank	<input type="checkbox"/> \$995	<input type="checkbox"/> \$1,195
CBA Affiliate Member	N/A	<input type="checkbox"/> \$1,745
Non-Member Bank	N/A	<input type="checkbox"/> \$1,695
Member One Day Pass:	5/4/17 <input type="checkbox"/> \$595	5/5/17 <input type="checkbox"/> \$595

Group Discount: 3+ registrants qualify for \$100 discount each. Must register by email, and all forms must be submitted together.

SPOUSE/GUEST REGISTRATION

Registration covers all meals and social functions

Full Name _____

Badge Name _____

Email Address _____

Registration Fee \$595

CANCELATION POLICY

Submission of this form to CBA constitutes acceptance of the fees and policies. Substitutions are allowed, at no additional cost. Written notice is required for all substitutions/cancellations. The full registration fee will be refunded if written notice is received by 4/5/17 and 50 percent if by 4/14/17. No refunds will be provided after 4/14/17. Registrations made on or after 4/14/17 are not subject to refund.

FOR CBA USE ONLY

CRM# _____ Invoice # _____

Event Code _____ Ind ID _____

CK# _____ Amt _____ Date Iss _____ Date _____

Corp/Pers Date Dep _____ By _____ By _____

QUESTIONS: Contact Lori Black at (916) 438-4415 or registrations@calbankers.com