

**NATIONAL BANKERS ASSOCIATION**  
**91<sup>st</sup> ANNUAL CONVENTION REGISTRATION & RESERVATION FORM**  
**Intercontinental - Washington, DC - The Wharf**  
**Washington, DC**  
**October 03-05, 2018**

**REGISTRATION INSTRUCTIONS:**

1. Complete all portions of this form and mail to: **NBA 91<sup>st</sup> Annual Convention, 1513 P Street, N.W., Washington, D.C. 20005.** Checks should be made payable to the NBA or credit card authorization for registration must accompany this registration form.
2. **PLEASE PRINT OR TYPE ALL INFORMATION.** Your name and bank/company will appear on your badge **EXACTLY** as you have indicated on this form.
3. Please make a copy of this form for your files.
4. You may use our 24-hour fax number **(202) 588-5443** to register by credit card.
5. These fees supersede all previously published fees. Please use only those fees on this form in determining your payment.

**CONVENTION REGISTRATION:**

(Please Check One)

- Registrant       Corporate Sponsor       On-Site Registrant       Speaker       Exhibitor

Name \_\_\_\_\_

Bank/Company \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

\_\_\_\_\_ e-mail \_\_\_\_\_

(Name as you wish for it to appear on badge)

**REGISTER SPOUSE AND GUEST HERE:**

Spouse/Guest Name \_\_\_\_\_

Name(s) as you wish it to appear on badge, \_\_\_\_\_

**METHOD OF PAYMENT**

(PLEASE CHECK ONE)

- Check     American Express     Master Card     VISA

**AUTHORIZATION TO CHARGE**

\_\_\_\_\_  
Please print name as it appears on card

Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_  
(CSC) \_\_\_\_\_

Signature \_\_\_\_\_

Total Number of Registrants \_\_\_\_\_ Total Amount \_\_\_\_\_

**Please specify any special dietary requirements/restrictions.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CONVENTION REGISTRATION FEES  
(CHECK ALL THAT APPLY)**

**CATEGORY**

**The first two (2) convention registrants (of each bank/company) will attend at the regular member rate, after that each person attending will be at a flat rate of \$750.00.**

- |                                      |         |
|--------------------------------------|---------|
| <input type="checkbox"/> Members     | \$950   |
| <input type="checkbox"/> Non-Members | \$1,200 |
| <input type="checkbox"/> Spouse      | \$600   |
| <input type="checkbox"/> Guest       | \$750   |

**Cancellation Fee of \$100 by 09/18/18  
Full registration due after 09/18/18**

Hotel reservations can be made through the NBA office to receive the special rates quoted below. Reservations cannot be processed unless accompanied by the Convention Registrations & Reservation Form. PLEASE DO NOT SEND A ROOM RESERVATION DEPOSIT UNLESS YOU ARE GUARANTEEING LATE ARRIVAL WITHOUT A CREDIT CARD. The hotel will accept reservations directly until the cutoff date of **August 31, 2018**, after which time, we cannot guarantee a room or the **convention room rate**. After the deadline date, please contact NBA.

**PLEASE CHECK THE DESIRED ACCOMMODATION:**

- Single \$339 plus 14.8% tax;
  - Double (two beds) \$339 plus 14.8% tax;
- Suite rates are available upon request.

All reserved rooms must be guaranteed with a major credit card. The first night's deposit will be charged to your credit card immediately. (Deposit refundable up to 30 days in advance of convention date)

ARRIVAL DATE: \_\_\_\_\_  
 DEPARTURE DATE \_\_\_\_\_

PLEASE NOTE: Check-in Time is 4:00 p.m.  
 Check-out Time is 12:00 p.m.

**Intercontinental – Washington, DC – The Wharf**  
**801 Wharf Street, SW**  
**Washington, DC 20024**  
**1-833-249-1029**  
**Group Code AM3**

For Convention Registration, Hotel Reservation and information, telephone NBA Headquarters at (202) 588-5432  
 Website: [www.nationalbankers.org](http://www.nationalbankers.org)  
 Email addresses: [eholiday@nationalbankers.org](mailto:eholiday@nationalbankers.org)  
 Address: National Bankers Association  
 1513 P Street, NW  
 Washington, DC 20005

**Hotel Reservations**

**GUARANTEE**

(PLEASE CHECK APPROPRIATE BOX)

- MasterCard    VISA    American Express

Name of Cardholder \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature of Cardholder \_\_\_\_\_

**HOTEL RESERVATION  
 DEADLINE DATE  
 AUGUST 31, 2018**



Intercontinental – Washington, D.C. – The Wharf

**FOR NBA OFFICE USE ONLY**

Date Received: \_\_\_\_\_

Authorization Number: \_\_\_\_\_

Confirmation Number: \_\_\_\_\_