

NMBA Vendor Event Application



MISSION:
POSSIBLE



June 6-7, 2019:

Associate Member: \$1,000

Non-Member: \$2,000

Company Name

Mailing/ Billing Address

City

State

Zip

Phone # (area code first)

Representative Name & Title

FOR NMBA USE ONLY

Amount Rec'd: \$ _____ Check

Vendor Event Applications Only:

Describe your company. Please limit your description to 25 words. **Note:** The final program will read exactly as you have indicated below. Show ® for registered product names.

Charge to Mastercard/Visa:

Name as it appears on Card

Credit Card Number

Expiration

Fax form to: (505) 822-8345

Mail with payment to:

New Mexico Bankers Association, 316 Osuna NE, Suite 502, Albuquerque, NM, 87107

*** Payment must be received prior to event.**