

## 63rd Annual Convention June 15-16, 2016—Delray Beach Marriott

Name (as you v	wish it to appear	on your name b	adge)		
Spouse/Guest	Name (only if the	ey are registering	g for the full con	vention)	
Company					
Address City/State/				Zip	
Phone Email					
FULL CONV	ENTION REGIST	TRATION FEES	BELOW—Acces	s to all day and evening ev	ents Wednesday and Thursday
□ I am a CMB □ I am a MBA of Florida Member □ I am a Member of another State Association. (We will extend our member rate.) □ This is my first MBAF Convention—deduct \$50 □ I am disabled. Please contact me to discuss my special needs. Please indicate any special dietary considerations:				RSVP's Needed for the events below—Please check these events you will attend—no extra cost for the convention events, we need counts for room set ups and food requirements. (The other convention events are based of a flow of attendance and is not as important for exact counts but these are.)  CMB Society of Florida Luncheon Meeting Thursday Thursday Evening Installation Banquet Mardi Gras Style!  Golf—\$39++ we need to know your interest to reserve your tee time. Golf Wednesday Morning (you pay at the course, more info sent separately)	
-	Il Registration! by 4/22/16 \$395 \$495	_	stration Fee after 4/23/16 \$495 \$595 \$350	WEDNESDAY ONLY: (NO DISCOUNTS  Member \$85  Non-Member \$185  Includes Wednesday sessions, and brea only. (Please note: the evening event requires a separate ticket purchase as perbelow.)	☐ Member \$150 ☐ Non-Member \$250 Includes all Thursday sessions, breaks and lunch only. (Please note: the Installation
( <i>Please do not pu</i> The spouse/guest t	rchase tickets if you	u register your spo entrance to all conver	use or guest for the	stered for the Full Convention  If the full convention as per spouse/gues  adge.) Tickets below are only for thos	ot fee above. e that may just be able to come to one of the
□ Golf Guest's Only— How Many?				<ul> <li>□ CMB Luncheon (Thursday) \$60</li> <li>□ Luncheon (Thursday Afternoon) \$60</li> <li>□ Installation Banquet and Reception (Thursday Evening) \$140</li> </ul>	
	rsday Morning) \$3				
Verification C	ode: (E) NT Name as it a	Signature of Cappears on the	Card Holder: _ e card:	Holder (indicate only <i>if di</i>	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				s a corporate card?

Refunds are provided minus a \$75 cancellation fee if received and acknowledged in writing by June 1, 2016. No refunds can be provided after this date since we have to submit final hotel guarantees. Registration substitutions are accepted!

Mail/fax/email form: (make checks payable to:) Mortgage Bankers Association of Florida P.O. Box 592245 Orlando, FL 32859-2245 PH: 407-855-6155 FAX: 321-445-4699

Email: mbaf@mbaf.org Website: www.mbaf.org

HOW TO REGISTER: • Register online atwww.mbaf.org, login and complete the registration information.

• This is a Fillable and Submittable Form: Fill in this form by saving first on your computer with your name then fill it out and click the submit button at the top. • Mail or Fax this form, info to the left.

Office Use Only	
Date Received:	
Check/CC:	
Amount:	