

Bank Legal Risk Management Conference

October 16 – 17, 2025 | Courtyard by Marriott, Columbia, MO

REGISTRATION FORM

Please register the following individual(s). Please enter the information below EXACTLY as you wish it to appear on your name badge and registration list. Please copy this form for additional registrations.

Please PRINT or TYPE below. You may photocopy this form for additional registrants.

Organization Information

Bank _____

Address _____ City/State/ZIP _____

Phone _____

Name of Attendees

Name _____

Title _____

Email _____

Name _____

Title _____

Email _____

Name _____

Title _____

Email _____

Name _____

Title _____

Email _____

Registration Fees

\$450.....Full Conference Member Fee # _____ \$ _____

\$375Each Additional # _____ \$ _____

\$250Thursday Only # _____ \$ _____

\$325Friday Only # _____ \$ _____

\$1700Nonmember Fee # _____ \$ _____

Total Amount Due: \$ _____

Payment Choice (check one):

☐ Check enclosed, payable to MBA.

☐ Invoice Bank

☐ Credit Card Payment (Please type.)

Exp. Date _____ **CVV** _____

No. _____

Type Name _____

Signature _____

Three Ways to Register

☎ 573-636-8151

🌐 mobankers.com

✉ Mail check payable to Missouri Bankers Association and form to:

Missouri Bankers Association
P.O. Box 57
Jefferson City, MO 65102

