

Registration Form

Online registration is preferred. Please visit yourmug.org and register online if possible.

You will receive an emailed invitation to register. Registration is also available on the member-only portion of the website at www.yourmug.org. Credit Card information cannot be accepted on this form; please use the online form only to pay by credit card in order to protect your security.

REGISTRATION INFORMATION

PLEASE TYPE OR PRINT CLEARLY

MUG Registrant (as you wish it to appear on your name badge)

First Name: _____

Last Name: _____

Company: _____

Street Address: _____

City/State/Zip Code: _____

Telephone: _____

Email: _____

PRIMARY JOB RESPONSIBILITY

- | | |
|---|---|
| <input type="checkbox"/> Auditor | <input type="checkbox"/> Finance and Accounting |
| <input type="checkbox"/> Retail Banking | <input type="checkbox"/> Information Technology |
| <input type="checkbox"/> Compliance | <input type="checkbox"/> Lending Operations |
| <input type="checkbox"/> Deposit Operations | <input type="checkbox"/> Electronic Services |
| <input type="checkbox"/> Other _____ | |

- In House Client
 Service Bureau Client

- This is my first MUG Annual Meeting
 I have special needs (dietary, physical impairment, etc); please list:

I am a member of the following MUG Subgroup (s):

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> MOSUG | <input type="checkbox"/> BIMUG |
| <input type="checkbox"/> NEARMUG | <input type="checkbox"/> DEVELOPERS (DUG) |
| <input type="checkbox"/> CREDIT UNION | |

REGISTRATION FEES:

Please check the one applicable to the above registrant.

- First Registrant..... FREE
 Additional Registrant (before 6/28/19) \$850
 Additional Registrant (after 6/28/19) \$900
 Spouse/Guest Registrant \$250
 (includes all food functions and parties)

Spouse/Guest Full Name: _____

Spouse/Guest: Optional Separate Tickets

- Sunday Night Opening Party \$75.00
 Monday Breakfast \$25.00
 Monday Lunch..... \$35.00
 Tuesday Brunch..... \$35.00
 Tuesday MUG Annual Party \$100.00
 Wednesday Breakfast..... \$25.00

Optional Lunch/Breakfast Registration

(See schedule for descriptions)

Monday 12:00 - 1:00 PM

- New Attendees Luncheon (for First-Timers)

Wednesday 8:00 - 8:45 AM

- Cohesion Users Group Breakfast
 BI Users Group Breakfast

Processing Fee (required) _____ \$5.00

TOTAL ENCLOSED \$ _____

Cancellations must be done in writing at least 30 days before the meeting and will incur a \$75 processing fee.

Federal Tax I.D. # 31-1231090

Make Checks Payable and Mail To:

MUG
P.O. Box 770178
Winter Garden, FL 34777-0178
Phone: 407-347-5730

REGISTRATION DEADLINE

Sept. 13, 2019

After that, please register on-site.