



Register online at [www.cbofm.org](http://www.cbofm.org)

PRICING INFORMATION	
(Applies to in-person and virtual attendees unless otherwise noted)	
Convention	Activities <i>(Space is Limited – Register Soon)</i>
CBM Member – First attendee	\$595.00
CBM Member – 2nd attendee	\$495.00
CBM Member – 3rd attendee or more <b>(In-Person)</b>	\$275.00
CBM Member – 3rd attendee or more <b>(VIRTUAL)</b>	\$175.00
Former CBM Member Retiree	\$100.00
Non-Member	\$995.00
Spouse/Guest	\$250.00

  

<p><b>ROOM RESERVATIONS</b>            Grand Traverse Resort room reservations can be secured at <a href="http://www.grandtraverseresort.com">www.grandtraverseresort.com</a>. Click on “Book Here” and enter group code CBM2020.</p>	<p><b>CANCELLATION POLICY</b>            Cancellations must be received by August 24, 2020 for 100% refund. No refunds are provided for cancellations or absences which occur after this date. Substitutions are welcome at any time.</p>
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**REGISTRATION INFORMATION**

Bank/Company: \_\_\_\_\_ Primary Contact: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Please provide name(s) for convention attendees as it should appear on name badge and check all appropriate boxes.**

Attendee 1: \_\_\_\_\_ Email: \_\_\_\_\_ \$\_\_\_\_\_ reg fee(s)  
 Golf  Cookout Only  Spouse/Guest  Trap Shoot

Attendee 2: \_\_\_\_\_ Email: \_\_\_\_\_ \$\_\_\_\_\_ reg fee(s)  
 Golf  Cookout Only  Spouse/Guest  Trap Shoot

Attendee 3: \_\_\_\_\_ Email: \_\_\_\_\_ \$\_\_\_\_\_ reg fee(s)  
 Golf  Cookout Only  Spouse/Guest  Trap Shoot

Attendee 4: \_\_\_\_\_ Email: \_\_\_\_\_ \$\_\_\_\_\_ reg fee(s)  
 Golf  Cookout Only  Spouse/Guest  Trap Shoot

\$\_\_\_\_\_ **Total Due**

**PAYMENT OPTIONS**

**By mail:** Community Bankers of Michigan, 830 W. Lake Lansing Road, Suite 250, East Lansing, MI 48823  
**By fax:** 517-336-7833 **By phone:** 517-336-4430

**Credit card:**

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Name on Card \_\_\_\_\_ Credit Card Number \_\_\_\_\_  
 Visa  MC  Discover  AmEx

Exp Date \_\_\_\_\_ Sec Code \_\_\_\_\_ Signature \_\_\_\_\_

Check Payable to “Community Bankers of Michigan” Enclosed  Please invoice me **(CBM members only)**