



MACVB 2010 Annual Meeting Registration June 6-8, 2010

Name:

Company:

Address:

City/State/Zip: ,

E-Mail Address:

Phone: **Fax:**

- MACVB Member (\$130 each)**
- Additional Staff Member from MACVB Member Bureau (\$90 each)**
- Board Member (\$95 each)**
- Non-Member Destination Marketing Organization (\$185 each)**
- Allied Member (No Charge w/ Paid Allied Membership)

Comments, Suggestions or Questions:

- Check is enclosed - Made payable to MACVB**

If you prefer to **pay by credit card**, please complete the credit card information that follows:

Name on Credit Card:

Billing Address: **City/St/Zip:** ,

Credit Card #:

Credit Card Type: Visa MasterCard American Express Discover / **Expiration Date:** /

Mail this form (and check if applicable) to:
Missouri Association of Convention & Visitor Bureaus
PO Box 445 ~ St. Joseph, MO 64501