

Building relationships with current and potential customers is essential to the success of your organization. MBA Associate Members access exclusive benefits and gain a direct connection!

\$1,300 (Applications received Jan. 1 - June 30)

\$900 (Applications receivedJuly 1 - Dec. 31)

Please accept this as application for MBA Associate Membership, subject to approval by the MBA Board of Directors. My annual membership dues payment is enclosed.

Signature of Applicant:

Bank	
Contact	
Title	
Phone	
Email	

MBA MEMBER BANK REFERENCE (Required for Board approval)

ASSOCIATE MEMBER APPLICANT

NAME		
COMPANY		
ADDRESS		
CITY/STATE/ZIP		
PHONE		
WEBSITE		
EMAIL		
KEY PERSON TO WHOM MAIL/EMAIL SHOULD BE SENT		

NAME _____

EMAIL _____

(Officer duly authorized)

PHONE ____

Payment is due with application submission.

- \Box My check is enclosed payable to MBA.
- $\hfill\square$ I have attached a brief company description.
- □ The requested MBA Member Bank Reference information is provided above.

Mail the completed form and payment to: Melissa Hart Missouri Bankers Association P.O. Box 57 Jefferson City, MO 65102 mhart@mobankers.com

