



Registration Form



Space is Limited! Sign Up Today!

All registrants will receive a confirmation, via email. Please complete a separate form for each registrant. Anyone withdrawing within 10 days of a session will be charged the full student fee. Substitutions are permitted at any time.

Name: _____ Badge Name: _____

Title: _____ Bank/Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Cell Phone: _____

Email: _____

Special Assets 3/16/20 (9 to 11 a.m.)	Members \$199 / \$349*	Non-Members \$299 / \$449*	\$ _____
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* Includes session on Flashdrive. The session will have its own file with the PowerPoint and synchronized audio.

Fee includes continental breakfast, breaks, and all materials.

Dietary Restrictions & Special Needs (Please State): _____

REGISTRATION PAYMENT INFORMATION

- Check enclosed payable to: **Delaware Financial Education Alliance**
- Check will follow
- Please bill the name and address above
- Pay by Credit Card (complete the information below)

Account Name: _____ Visa MasterCard Discover

Account Number: _____ Expiration Date: ____/____

Signature: _____

Location:

**The University & Whist Club
805 N Broom St, Wilmington, DE 19806**

Return Completed Form to:

email: renee.rau@debankers.com

Fax: 302-678-5511, or

Mail: DBA/FEA

P.O. Box 494

Dover, DE 19903-0494

attn: Renee Rau