

REGISTRATION & LODGING

The League will pay for four (4) chapter officers to attend the conference and for two (2) sleeping rooms per chapter. Additional officers and guests are welcome at the rates listed below. **Return this form and payment by May 28, 2019 to: The League 1 East Main Street, Suite 101, Madison, WI 53703 | f: (608) 250-2606 | Registration@TheLeague.coop**

| Participant | Name | Credit Union | Conference Fee | Meals | Sleeping Rooms | Total |
|--------------------|------|--------------|--------------------------------|---|---|-------|
| Chapter Officer | | | <input type="checkbox"/> \$0 | <input type="checkbox"/> Fri Lunch \$0 <input type="checkbox"/> Fri Dinner: \$0 <input type="checkbox"/> Sat Breakfast: \$0 | <input type="checkbox"/> Fri : \$0 <input type="checkbox"/> Sat: Pay upon arrival <input type="checkbox"/> # in Room: _____ | \$ |
| Chapter Officer | | | <input type="checkbox"/> \$0 | <input type="checkbox"/> Fri Lunch \$0 <input type="checkbox"/> Fri Dinner: \$0 <input type="checkbox"/> Sat Breakfast: \$0 | <input type="checkbox"/> Fri : \$0 <input type="checkbox"/> Sat: Pay upon arrival <input type="checkbox"/> # in Room: _____ | \$ |
| Chapter Officer | | | <input type="checkbox"/> \$0 | <input type="checkbox"/> Fri Lunch \$0 <input type="checkbox"/> Fri Dinner: \$0 <input type="checkbox"/> Sat Breakfast: \$0 | <input type="checkbox"/> Fri : \$164 <input type="checkbox"/> Sat: Pay upon arrival <input type="checkbox"/> # in Room: _____ | \$ |
| Chapter Officer | | | <input type="checkbox"/> \$0 | <input type="checkbox"/> Fri Lunch \$0 <input type="checkbox"/> Fri Dinner: \$0 <input type="checkbox"/> Sat Breakfast: \$0 | <input type="checkbox"/> Fri : \$164 <input type="checkbox"/> Sat: Pay upon arrival <input type="checkbox"/> # in Room: _____ | \$ |
| Chapter Officer | | | <input type="checkbox"/> \$109 | <input type="checkbox"/> Fri Lunch \$0 <input type="checkbox"/> Fri Dinner: \$0 <input type="checkbox"/> Sat Breakfast: \$0 | <input type="checkbox"/> Fri : \$164 <input type="checkbox"/> Sat: Pay upon arrival <input type="checkbox"/> # in Room: _____ | \$ |
| Chapter Officer | | | <input type="checkbox"/> \$109 | <input type="checkbox"/> Fri Lunch \$0 <input type="checkbox"/> Fri Dinner: \$0 <input type="checkbox"/> Sat Breakfast: \$0 | <input type="checkbox"/> Fri : \$164 <input type="checkbox"/> Sat: Pay upon arrival <input type="checkbox"/> # in Room: _____ | \$ |
| Guest | | | | <input type="checkbox"/> Fri Dinner: \$65 <input type="checkbox"/> Sat Breakfast: \$14 | | \$ |
| Guest | | | | <input type="checkbox"/> Fri Dinner: \$65 <input type="checkbox"/> Sat Breakfast: \$14 | | \$ |
| Grand Total | | | | | | \$ |

Payment

Check payable to Wisconsin Credit Union League Total enclosed \$ _____
 Credit Card: VISA MasterCard Amount charged \$ _____
 Charge Card # _____ CID Number _____ Exp. Date ____/____/____
 Name on Card _____ Card Address _____ City _____ State _____ Zip _____
 ACH Make direct withdrawal for \$ _____
 Debit Entry to # _____ (CU Routing/Transit #)
 From Account # _____ Authorized Signature _____



1 East Main Street, Suite 101, Madison, WI 53703 | f: (608) 250-2606
p: (800) 242-0833 | f: (608) 250-2606 | Registration@TheLeague.coop | TheLeague.coop

Cancellation/Substitution Policy: Cancellations and refund requests made eight or more days prior to the conference date must be in writing or faxed to (608) 250-2606 and are subject to a \$35 service charge. No refunds will be granted if a cancellation is received seven days or less before the conference date. Substitutions are accepted any time before the conference begins, but The League must be notified.