



MARCH 5 – 7, 2017
CLEVELAND, OH
 Indiana Wesleyan University
 4100 Rockside Road
 Seven Hills, OH 44131

IBBA SUMMIT ENROLLMENT FORM: RETURN BY FEBRUARY 27, 2017

To enroll in the Summit, please complete the form below and fax to 800-630-2380 or email to education@ibba.org. Please note that all transactions must be processed via credit card, and all charges are in U.S. dollars.

Your Name: _____

Your Mailing Address: _____

Your Phone: _____

Your Email: _____

Company Name: _____

SELECT (X) YOUR PROGRAM BELOW

Full Summit Pass.....\$ 750 USD _____

CBI Bundle Package\$2,696 USD _____



PAYMENT DETAILS

Credit Card Type: _____
 (Visa, MasterCard, Amex) _____ Expiration: _____ Security Code: _____

Credit Card Number: _____

Name on Credit Card: _____

- My credit card billing address is the same as the mailing address provided above.
- My credit card billing address is:

TERMS & ACKNOWLEDGEMENT

- (1) Confirmation.** You will receive an email within 3 business days confirming your registration and transaction are complete. This email serves as your receipt.
- (2) Summit Pass Refunds.** Summit Pass cancellations must be received in writing to education@ibba.org. Cancellations received at least 5 business days prior to the event will be entitled to a full refund, less a \$50 USD transaction fee. Cancellations received after this time or no-shows will not be refunded.
- (3) CBI Bundle Refunds.** The IBBA Membership, Online Courses and CBI Fee components of the CBI Bundle Package are non-refundable. See #2 above for terms regarding Summit Pass Refunds. Conference Pass refunds are subject to the then-current cancellation and refund provisions posted for the Conference.
- (4) Previous Purchases.** The CBI Bundle Package does not apply to previous purchases.
- (5) Course #221 Online Enrollment.** Following your verified attendance of courses #210 and #221, you will receive an email with your enrollment instructions for course #221 online.

By signing below, I acknowledge that I have read and understand the terms above, and I authorize my credit card to be charged for the applicable amount of the Program I selected.

 Print Name

 Signature

 Date