

KCMBAs 139th Annual Meeting

Presented by: Davis, Bethune & Jones
Norman & Graves, LLC

December 8, 2023
11:00 am
Sheraton Crown Center

REGISTRATION FORM

Firm: _____ Contact Name: _____

Address: _____ City/State/Zip: _____

Email: _____ Phone: _____

For all group reservations, please attach a list of the guests at your table. If you are contributing unused seats, please indicate how many. All reservations must be made and paid in full before **November 30, 2023**.

Mail or fax form with check or credit card information to:

Kansas City Metropolitan Bar Association

2300 Main St., Ste. 100

Kansas City, MO 64108

Fax number (816) 474-0103

For your security, please do not email credit card information.

Register early – this event is expected to sell out!

By November 17: ____ @ \$85 each = \$ ____ Group Tables: ____ @ \$825 each = \$ ____

After November 18: ____ @ \$95 each = \$ ____ Group Tables: ____ @ \$925 each = \$ ____

I Check # _____

If Paying by Credit Card: ☐ American Express ☐ MasterCard ☐ Visa ☐ Discover

Card No: _____ Exp. Date: _____ CVC: _____

Billing Zip Code: _____

Cardholder's Name: _____

Signature: _____

REGISTER
OR SPONSOR



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