

REGISTRATION FORM
ANNUAL CONFERENCE & TRADE SHOW
November 12 – 13, 2020
Graduate Hotel - Lincoln, Nebraska



COPY FORM AS NEEDED

Bank/Company: _____

Address: _____ City: _____ State: _____ Zip: _____

First Name: _____ Last Name: _____ Title: _____

E-mail: _____

Spouse/Guest Name: _____

Full Registrant <small>Incl. sessions, trade show, all meals & TopGolf® event Friday night.</small>	NICB Member Rate	Non-Member Rate	Total
First Full Registrant <small>___ Banker ___ Associate Member</small>	\$320	\$420	\$
Additional Full Registrant <small>___ Banker ___ Spouse ___ Associate Member</small>	___ @ \$275	___ @ \$375	\$

Per Event Registration	NICB Member Rate	Non-Member Rate	# attending	Total
Thursday, Nov. 12 <small>Sessions, Trade Show, Lunch & Expo Reception</small>	\$150 per person	\$275 per person		\$
Thursday Evening Reception only	\$40 per person	\$75 per person		\$
Friday, Nov. 13 <small>Sessions incl. Breakfast, Lunch and Keynote Speaker</small>	\$125 per person	\$250 per person		\$
Friday, Nov. 13 <small>Lunch and Keynote Speaker only</small>	\$50 per person	\$95 per person		\$
Raffle Tickets for NE-ICBPAC Fundraiser <small>Advance Purchase and/or if unable to attend</small>	\$20 per ticket	X no. of tickets _____	=	\$
TOPGOLF® & Networking Event – Friday Night <small>Friday evening with food, golf & networking</small>	\$45 per person			\$
Video of Sessions – all sessions except Friday <small>Keynote Speaker or Governor</small>	\$100	\$200		\$

Total Amount Due: \$ _____

Payment by Check payable to: Nebraska Independent Community Bankers

E-mail Registration Form by **November 5** to: tracy@nicbonline.com

Postal Mail to: **NICB**
1001 S 70 St Ste 101
Lincoln NE 68510

NE-ICBPAC Raffle: Payments can be received by personal check, cash or by corporate check if under \$50.00.

COVID-19 clause for attendees

By registering and attending the Nebraska Independent Community Bankers Annual Conference and Trade Show, you acknowledge that there is an unknown risk of exposure to COVID-19 through exposure to contaminated objects, as well as through personal contact. Such exposure carries with it a certain degree of risk that could result in illness, disability, or death. You agree to release and hold harmless Nebraska Independent Community Bankers, its employees, officers and vendors including the Graduate Hotel Lincoln from and against all claims of damages and liability resulting from exposure to COVID-19. Registrants/Attendees also warrant they are abiding by their state/locality laws regarding COVID-19 restrictions.

IRS Notice: The IRS requires a notice on registration forms, which informs the attendee of the amount of the fee representing food and beverage. We estimate this cost at \$119.95 if paying a full conference registration fee. Consult your tax advisor for any tax advice.

Registration Cancellation Policy: If received three business days before event date, only food and beverage costs will be deducted.

Questions: NICB 402-474-4662 📞 tracy@nicbonline.com