

TO COMPLETE YOUR MEMBERSHIP APPLICATION, PLEASE SUBMIT THE FOLLOWING ITEMS:

MBA Affiliates New Memb	er Contract
Affiliate Information Form	
50-Word Company Descrip	tion for use in MBA publications and website
Payment of Annual Affiliate	e Fee (checks only, please)
Speaking Opportunities Fo	rm
Complimentary Magazine S Magazine Subscription #1- Magazine Subscription #2-\	Will be mailed to primary contact.
Name	
Mailing Address	City, State, Zip
EMAIL YOUR COMPANY/FIRM LOGO to Brooke McCoy at bmccov@msbankers.com.	

Application paperwork should be submitted to bmccoy@msbankers.com or faxed to Brooke McCoy at 601-355-6461. Check payments should be mailed to:

Mississippi Bankers Association Attn: Brooke McCoy P.O. Box 37 Jackson, MS 39205