



# 2008 BBIM Autumn Meeting Registration



## Basic Information

Enter name of Inn: \_\_\_\_\_

Number of people attending:

Names of those attending: \_\_\_\_\_

Email address for acknowledgement: \_\_\_\_\_

Are you currently a BBIM member? (Please check only one)

- Inn Member
- Applicant for Full Membership
- Associate Member
- Not a BBIM Member (Please fill in section below)

Complete the following ONLY if you are NOT currently a BBIM Member

Street Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contact phone: (    ) \_\_\_\_\_

Web address: \_\_\_\_\_

## PAYMENT:

Please make \$25 check payable to B.B.I.M. and mail with registration to:

B.B.I.M.  
c/o Brian Slind  
1315 University Avenue  
Columbia, MO. 65201-5906



*Thank you for your support of this BBIM event*

