



Oklahoma Bankers Association

Strategic Members Update Form

I understand to obtain prior written approval from OBA Services Company for any use of OBA's name and/or logo.

Signature: _____

Company Name

Company Mailing Address

City, State, Zip

Company Phone Number

Company Website

Primary Contact

Title

Primary Contact Phone (if different from Company phone)

Primary Contact E-mail address

Person to list in the OBA Directory & on OBA Website (if different from Primary)

Directory and Website Contact Phone (if different from Primary)

Directory and Website Contact Email (if different from Primary)

Directory and Website Contact Address (if different from Primary)

WHERE DO YOU WANT TO BE LISTED IN THE OKLAHOMA BANKER NEWSPAPER BANKERS' RESOURCE DIRECTORY SECTION

- Accounting/Auditing & CPA Firms
- Electronic Funds Transfer
- Financial Services
- Miscellaneous
- Computer Hardware, Software & Technology (Including Internet)
- Employment
- Insurance
- Marketing
- Consulting
- Equipment/System
- Legal Services
- Supplies

PAYMENT INFORMATION

- ◆ **Strategic Member \$1,200** for 2020 Dues (membership will expire December 31, 2020 - \$200 Discount for early payment)
- ◆ **Diamond Strategic Member \$10,000** for 2020 Dues (membership will expire December 31, 2020)
- ◆ **\$5,000** for 2020 Marketing & Event Sponsorships Package (members only option)
- ◆ Payments must be received by January 15, 2020, to be included in the *2020 Oklahoma Directory of Banks*.
- ◆ Make checks payable to: **OBA Services Company** or fill out the credit card authorization form.

RETURN THE FOLLOWING ITEMS TO THE ADDRESS BELOW:

- Payment
- Company description
- Logo (email)
- Company brochure/Informational flyer

Thi Pham, Vendor Relations & Product Coordinator

Oklahoma Bankers Association

PO Box 960173 Oklahoma City, OK 73196

Email: Thi@oba.com / Secure Fax: (405) 604-9545



Oklahoma Bankers Association

Dues Credit Card Authorization Form

CONTACT INFORMATION

Name: _____

Company/Bank: _____

Address: _____

City/State/Zip: _____

Phone: _____ email: _____

PAYMENT INFORMATION

I authorize the credit card listed below to be charged in the amount of:

- \$1,200** for 2020 **Strategic Membership** Dues (membership will expire December 31, 2020 - \$200 Discount for early payment)
- \$10,000** for 2020 **Diamond Strategic Membership** Dues (membership will expire December 31, 2020)
- \$5,000** for 2020 Marketing & Event Sponsorships Package (members only option)
- _____ for 2020 Marketing & Event Sponsorships (members only option)

Card Type: MasterCard Visa American Express Discover

Name on Card: _____

Card Number: _____ **Exp. Date:** _____ **CSC Number:** _____

Signature: _____

RETURN TO THE SECURE OPTIONS BELOW:

Secure Email: secure@oba.com

Secure Fax: 405.604.9545

PLEASE RETAIN THIS FORM TO SERVE AS YOUR RECEIPT FOR PAYMENT

