

**Set-Up Form**

**Making the Most of Your HBA Membership**

V0352019

* Please submit this form no less than **6 weeks prior to the event date**.

# Forms submitted less than 30 days prior to an event may require your chapter president’s approval.

**Send completed form to** **events@hbanet.org**

 **Chapter/Affiliate location:**       (for a full list of chapters/affiliates, visit[**http://www.hbanet.org/chapters**](http://www.hbanet.org/chapters)**)**

**Event date:**       **Start time****:**        **End time****:**       Time Zone:

**Event title:** Making the Most of Your HBA Membership

**Event short description**

Join us to learn about all the exciting opportunities that your HBA membership provides.

**Event description**

**Join us to learn about all the exciting benefits and opportunities that your HBA membership provides. Whether you are brand new to the HBA or a longtime member looking to get more involved, you will learn how to make the most of your HBA membership, updates on upcoming programs, and news about your HBA region and local chapter. Learn how to leverage your HBA involvement and experience the positive impact it can have on your career.**

**Event location and/or Dial-in information**

Name of venue:

Address:       City/state/zip:

**Conference Call Number:**       **Pin Number (if applicable):**

**Special instructions** (e.g., parking information):

**Speakers (if applicable)**

Name:

Title:

Company:
*Email (not published):*

**Registration information**

**Event is open to:** HBA Members and nonmembers

**Online registration deadline:**
**Onsite (walk-in) registration:**

**Capacity**

Is capacity limited? Space is limited to       registrants.

**-** **Chapter** **contact for event:** Name:       Email:       Phone: