



Missouri Group Travel Exchange

April 27-29, 2020

Drury Plaza Hotel &
Conference Center
Cape Girardeau



Supplier Registration Form

Please complete this registration form and return it to Missouri Travel Alliance, 1505 East Riverside Drive, Cape Girardeau, MO 63701-2219. You will receive a confirmation email when your form has been received.

Company Name: _____

Delegate Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Only the official delegate of the company will be allowed to participate in the conference.
Please note that there are NO guest or associate registrations available.

Payment: \$295 for Missouri Travel Alliance Members
(Company must maintain Missouri Travel Alliance membership in 2020 to qualify for member rate.)

\$435 for Non-Missouri Travel Alliance Members

Amount: \$_____ Check Credit Card: Visa MasterCard Discover American Express

Card Number: _____ Expiration Date: _____

*Cancellation policy: 50% refund if written notice is received by February 29, 2020. No refunds issued after that date.
Please make checks payable to Missouri Travel Alliance.*

The first 90 suppliers will be accepted on a first come basis.
After that, suppliers will be placed on a waiting list.

If you have any questions, contact Chuck Martin: MOGroupTravelExchange@gmail.com | 573-803-3777