HTIFCU TELE-CONFERENCE MEETING REGISTRATION

67TH ANNUAL MEMBERSHIP MEETING * APRIL 23, 2021 @ 10:00 A.M.

*Full Name:	*(Please Print)*
*Address:	*(Street, City, ST, Zip)*
*Member Account #	
*Phone:	
*e-mail:	

*DENOTES REQUIRED FIELD

HTIFCU will verify membership and minimum $25.00 share balance requirement. You will receive a meeting invitation / dial-in information one-week before the meeting.

☐ Check the box to Certify you are a member of Hotel and Travel Industry Federal Credit Union

For HTIFCU use:
□ Membership Verified by: _____ Date: _____