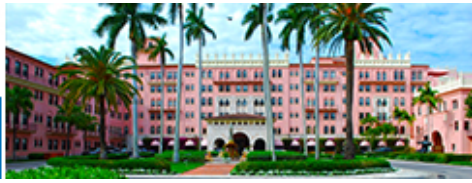




October 14 – 17



36TH ANNUAL SECURITIES FINANCE AND COLLATERAL MANAGEMENT CONFERENCE

Boca Raton Resort & Club, Boca Raton, FL

ATTENDEE REGISTRATION FORM

Conference Location: Boca Raton Resort & Club, 501 East Camino Real, Boca Raton, FL 33432

Registration Fee: Conference attendee rate includes tutorial, business sessions, receptions and breakfasts.

\$1900 after August 30, 2019

Pre-Conference Events: Tuesday, October 15, 2019 (Please check one yes or no) SPACE IS LIMITED PRE REGISTRATION REQUIRED

- Women in Securities Finance (10:00 a.m. – 12:00 p.m.)
Global Legal Regulatory & Tax Update and Future Strategy (12:30 p.m. – 1:30 p.m.)
Association Update (1:30 p.m. – 2:15 p.m.)
Harnessing FinTech Innovation in Securities Finance & Collateral Management (2:45 p.m. – 4:00 p.m.)
Transformational Leaders in Securities Finance & Collateral Management (4:00 p.m. – 4:45 p.m.)

Sponsored Events:

Wednesday, October 16, 2019 Sponsored by: IHS Market

- Tennis Tournament (1:30 p.m. – 4:30 p.m.)

Thursday, October 17, 2019 Sponsored by: RBC

- Golf Tournament (1:30 p.m. – 5:00 p.m.)

Please complete the following information or attach your business card. The information will be printed in the conference booklet & name badge.

- Mr. Mrs. Ms.

First Name: MI: Last Name:
Business Title: Institution:
Address: Suite/Floor:
City/State: Country and Postal Code:
E-mail Address: Phone Number:

PLEASE MAIL, EMAIL, OR FAX THIS REGISTRATION FORM

To: Rosemarie Casler Email: RCasler@rmahq.org Fax: 215-446-4100 Tel: 215-446-4081

Mail checks to: RMA, Attn: Rosemarie Casler, 1801 Market Street, Suite 300, Philadelphia, PA 19103

Cancellation Policy: Full refunds will be available on all cancellations e-mailed or faxed (see above) 15 or more business days prior to the start of the event. Registrations cancelled 6-14 business days prior to the event are subject to a service fee equal to 50% of the registration fee.

Payment Method:

- Credit Card—all credit card transactions are processed in U.S. dollars and are subject to the current exchange rates. VISA MasterCard AMEX Discover

Card Number: Expiration Date:

Cardholder's Name: Signature:

I understand my signature authorizes The Risk Management Association (RMA) to charge my credit card for this purchase.

GDPR Consent: Select all that apply

- Yes, I hereby consent to the transfer of my personal data outside of the European Union to RMA in the United States. Now that you have granted RMA your consent to the transfer of your personal data outside of the European Union we ask that you review the options below and select the ones to which you consent. Surveys Peer Sharing Events (e.g., round tables, conference) Executive Education/Training Association Communications (e.g., newsletters, announcements) New Services

Signature: Date: