



2020 Prime Time Plus Club Event Sign Up Sheet

If you would like to sign up for any of these events, please complete this form and return it to: State Bank of Cross Plains, Terri Sutter, PO Box 61, Mt. Horeb, WI 53572. **All reservations need to be made using this form. Please complete the back of the form as well. Reservations will be taken in date and time order they are received. Everyone attending an event needs to complete and sign a form before submitting. Thank you for understanding.**

Name(s): _____ Date: _____

Mailing Address (required): _____

(Complete street address with Apt. #)

(City, State and Zip)

Phone: _____ Travel Partner: _____

**If you are traveling with someone other than your significant other, they will need to complete and submit their own registration form.*

If you are traveling with another partner, please list names by each event.

Please indicate any special needs you may have: mobility, dietary, etc. _____

July – Fraud Prevention Lunch and Learn – Thursday, July 9, 2020
at our SBCP Verona Office (lower level), 108 N Main St., Verona – **Please sign up by Wednesday, June 24, 2020.**

July – Guaranteed Investments – Wednesday, July 15, 2020
at our SBCP Madison Office (lower level), 455 S Junction Rd., Madison – **Please sign up by Wednesday, July 1, 2020.**

July – Fraud Prevention Lunch and Learn – Thursday, July 23, 2020
at our SBCP Madison Office, 455 S Junction Rd., Madison – **Please sign up by Wednesday, July 8, 2020.**

August – Free Prime Time Member Appreciation Concert featuring Piano Fondue, Dueling Piano’s – Tuesday, August 18, 2020
Oregon High School Performing Arts Center, 456 N. Perry Pkwy., Oregon.

Please register me for the _____ 2:00 p.m. Show _____ 6:30 p.m. Show (Please only one show and one guest per member)

*There is a \$25 non-member fee for guests. This year we will be mailing your tickets, therefore we ask that you **RSVP no later than Monday, August 3, 2020.** Please return entire sign up form with registration. Thank you.*

If possible, I would like to be seated next to: _____ Please circle any special needs you may have. If you use a walker, please indicate if you would prefer to sit in your walker or a regular seat.

wheelchair walker cane visual impairment hearing impairment

September – Black Hills and Badlands – September 26-October 3, 2020 – Please mark box to request complete itinerary.
Feel free to call to check on availability. Lois Boehnen: 608-767-4752 or Terri Sutter: 608-416-4822 or primetime@sbcpc.bank.

October – Holy Hill Fall Blessings – Thursday, October 15, 2020
Cost: \$99.00 per member, \$119.00 per non-member. **Full payment is due with registration, no later than Thursday, August 13, 2020.**

Please circle preferred pick up location: Cross Plains Middleton Mt. Horeb Verona Waunakee

Please circle preferred menu choice: Stuffed Chicken Baby Back Ribs Salmon Wellington Seafood Casserole

November – Deer Camp at Memories Theater – Saturday, November 7, 2020
Cost: \$115.00 per member, \$135.00 per non-member. **Full payment is due with registration no later than Wednesday, July 15, 2020.**

Please circle preferred pick up location: Cross Plains Middleton Mt. Horeb Verona Waunakee

2021 – Alaska Tour – July 30-August 11, 2021 OR August 20-September 1, 2021 – Please mark box to request complete itinerary.
They will be available in June.

EVENT WAIVER - I hereby waive and release S.B.C.P. Bancorp, Inc., any State Bank of Cross Plains, their employees, representative and agents (hereinafter collectively referred to as "State Bank of Cross Plains") from all liability, claims or demands, without limitation, for actual or alleged claims, damages and injury arising from a medical emergency arrangement that becomes necessary and/or while participating in activities, events or travel sponsored by State Bank of Cross Plains. I assume all risk of personal injury, sickness, death, damage, and expense as a result of medical emergency decisions or arrangements made by State Bank of Cross Plains as well as participation in events or travel sponsored by State Bank of Cross Plains. I agree to hold State Bank of Cross Plains harmless, without limitation as to amount, against all liabilities, claims, causes of action and demands for personal injury, property damage or any claim of whatever nature or kind, together with any resulting costs and legal fees, arising out of or caused by any act or omission or alleged act or omission by State Bank of Cross Plains. I sign this document to bind my assigns, heirs and representatives of my estate. I am of legal age and am legally competent and I understand that the terms set forth herein are contractual and not a mere recital. I sign this document of my own free act and deed.

State Bank Refund Policy – A refund will be made if we have a waiting list and can fill your spot. In some cases we cannot give a full refund due to ticket purchases, meal number guarantees, or contracts with vendors. We will be as fair as possible with refunds.

Signature: _____ Signature: _____

Print name: _____ Print name: _____

Date: _____ Date: _____

Please fill out completely and drop off at any State Bank location or mail to: State Bank of Cross Plains, Attention: Terri Sutter, PO Box 61, Mount Horeb, WI 53572.

All reservations need to be made using this form unless specified otherwise, thank you for your understanding. Reservations will be taken in date and time order they are received. Everyone attending an event needs to sign this form before submitting. Thank you.

Credit Card Form

Name of Tour / Event _____

Name on Credit Card _____

Traveling Partner(s) if you are paying for them _____

Phone Number _____

I (We) wish to make the payment by credit card VISA MasterCard Discover

Account # _____ Expiration Date _____

Please charge my credit card account \$ _____ Signature _____

I (We) wish to make the payment by check (please make checks payable to Prime Time or State Bank of Cross Plains).