

MARCH 2020

# Contact information

**MEMBER – FLOOR CLERK – VENDOR – PRESS**

First Name:

Last Name:

Middle Initial:

For Members: Acronym:

For Clerks: Employers:

Vendors: Employers:

For Press: Employers:

Email Address 1:

Email Address 2:

## Telephone numbers

Mobile:

Home:

Other:

**Please send completed form to [Membership\\_cmegroup@cmegroup.com](mailto:Membership_cmegroup@cmegroup.com)**