

# CONFERENCE REGISTRATION FORM

## 2015 LIMRA Annual Conference October 25 – 27, 2015 – Sheraton Boston Hotel, Boston, MA To Register Online – [www.limra.com/events](http://www.limra.com/events)

Company \_\_\_\_\_

Last name/Family name \_\_\_\_\_ First name/Given name \_\_\_\_\_ MI \_\_\_\_\_

Name for badge \_\_\_\_\_ Spouse/Significant other (if attending) \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Country \_\_\_\_\_ Postal code \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Ext. \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Email \_\_\_\_\_

### Registration Fees\* (U.S. Funds)

Early Birds\*\*

LIMRA Member – \$1,245 \$ \_\_\_\_\_

LOMA (but not LIMRA member) – \$1,870 \$ \_\_\_\_\_

Nonmember – \$2,490 \$ \_\_\_\_\_

After October 1, 2015

Member – \$1,395 \$ \_\_\_\_\_

LOMA (but not LIMRA member) – \$2,095 \$ \_\_\_\_\_

Nonmember – \$2,790 \$ \_\_\_\_\_

Spouse/Significant other – \$150 \$ \_\_\_\_\_

Interpretation – \$150 (Spanish\*\*\*) \$ \_\_\_\_\_

Interpretation – \$150 (Portugese\*\*\*) \$ \_\_\_\_\_

CT employees add CT 6.35% sales tax \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

\*LIMRA requires prepayment of registration fees. \*\*Discount for payments received by October 1, 2015.  
\*\*\*Minimum of 15 people for one language required for this service. If minimum is not met, fee will be refunded.

### Please fax or mail this form to:

LIMRA  
Attn: Events Registration  
300 Day Hill Road, Windsor, CT 06095-1783, U.S.A.  
Fax: 860-285-7792

### Cancellation Policy

All cancellations must be received in writing. Notify [customer.service@limra.com](mailto:customer.service@limra.com). Cancellations received before October 2, 2015 will be refunded, less a \$75 processing fee. Cancellations received from October 2, 2015 to October 16, 2015, will be refunded, less a \$375 processing and administrative fee. No refunds will be issued after October 16, 2015.

In the event that a scheduled meeting or event is cancelled by LIMRA for any reason, LIMRA shall refund any conference registration fees that have been paid by the registrant. Under no circumstances, however, shall LIMRA be liable to the registrant for any other expenses including, but not limited to, airfare and hotel expenses incurred by the registrant.

### Method of Payment

- Check enclosed (payable to LIMRA in U.S. funds drawn on a bank in the United States)
- Credit card (check one):  MasterCard  VISA  Discover  AMEX  Diners

Card number \_\_\_\_\_ Exp. date \_\_\_\_\_

CVV  
(3- or 4-digit security code) located on the back of MC, VISA, Discover, Diners, and on the front of AMEX

Signature \_\_\_\_\_

Credit card billing address if different from above:

Address \_\_\_\_\_

City, state, zip \_\_\_\_\_

### Workshop Selections (Designate choice by number.)

Sunday, 10/25 – 4:00 to 5:00 p.m. (#1–2) \_\_\_\_\_

Monday, 10/26 – 10:30 to 11:30 a.m. (#3–5) \_\_\_\_\_

1:00 to 2:00 p.m. (#6–8) \_\_\_\_\_

Tuesday, 10/27 – 10:15 to 11:15 a.m. (#9–11) \_\_\_\_\_

### Advance Attendee List

LIMRA provides an advance attendee list with your business address to each Exhibitor and Sponsor registered for this conference. These vendors offer unique solutions and specialized expertise for our industry, and LIMRA limits their use of the advance list to one time in conjunction with this event.

May we include your email address on the advance attendee listing?  Yes/ No  
Full Privacy Policy is viewable at [www.limra.com](http://www.limra.com).

1<sup>st</sup> time attendee at the conference

Will you be attending the Women Leaders' Reception on Sunday, October 25 (LIMRA members only – women in the financial services industry)?  Yes  No

Will you be attending the Networking Luncheon on Monday, October 27?  Yes  No

Please list any dietary restrictions: \_\_\_\_\_

### For LIMRA Use

Registration number \_\_\_\_\_

Date received \_\_\_\_\_

Company number \_\_\_\_\_

Registrant number \_\_\_\_\_

Amount received \_\_\_\_\_



15AM

