



AGENCY MANAGEMENT INSTITUTE

May 28-29, 2009 | Registration Form

CONTACT INFORMATION: (Please type or print clearly)

Name: \_\_\_\_\_ Mr.  Mrs.  Ms. 
Badge Name: \_\_\_\_\_
Agency/Company: \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_
E-mail: \_\_\_\_\_

AMI REGISTRATION FEES:

PLEASE CHECK ONE:

Table with 3 columns: REGISTRATION CATEGORY, EARLY (BY 5/1/09), REGULAR (AFTER 5/1/09). Rows include NAILBA MEMBER AGENCY PRINCIPAL/STAFF, SPONSOR, YES, I WILL ALSO ATTEND NAFA'S ANNUITY TRAINING, and TOTAL AMOUNT DUE.

PAYMENT METHOD:

PAYING BY CHECK:

Check is enclosed (payable to NAILBA) Amount Paid: \$ \_\_\_\_\_

PAYING BY CREDIT CARD:

Visa  MasterCard  American Express

Credit card number: \_\_\_\_\_

CVC (3-4 digits on card) \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Signature: \_\_\_\_\_

CANCELLATION POLICY:

A \$100 fee will be charged for any cancellation received on or before May 15, 2009. No refunds will be granted after May 15, 2009. All registrations, changes and cancellations must be received in writing.

PLEASE SEND FORM AND PAYMENT TO:

FAX (credit card payment only): (703) 383-6942
MAIL (credit card and check made payable to NAILBA):
NAILBA AMI
P.O. Box 79968
Baltimore, MD 21279-0968



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