



NAIFA – FLORIDA

(National Association of Insurance and Financial Advisors – Florida)



“CONTINUING EDUCATION DAY”

SPONSORED BY NAIFA – MIAMI DADE

THURSDAY, FEBRUARY 16, 2012

Miami Springs Country Club, 650 Curtiss Pkwy, Miami Springs, FL 33166

You are cordially invited to attend the NAIFA–Miami Dade lunch meeting from 12:00 – 1:30 pm. Since it is a separate event from the CE, to RSVP for the chapter meeting call Maud Marie at (888) 918-6505

LONG TERM CARE IN AMERICA – 4 HOUR NAIC ONGOING TRAINING 8:00 AM – 12:00 PM

BRAND NEW!! ClearCert Approved! Satisfies the 4 hour ongoing training requirement for LTC. Provides meaningful, current updates on the LTC market, the Florida LTC Partnership and its relation to the FL Medicaid program, Medicare changes and legislative updates. **Intermediate level. Authority line 2-40. Course ID: 79003. Provider #654.**

ETHICS, SENIORS AND SUITABILITY – THREE OF A KIND 1:45 – 4:45 PM

BRAND NEW!! Mandatory for all agents selling life and/or annuity products. Meets the requirements of FS 627.4554. In depth review of ethical issues, new legislation, rules and procedures for agents, and multiple case studies to invoke thought, analysis, and discussion! **Intermediate level. Authority line 9911. Course ID: 78894. Provider # 654.**

REGISTRATION

(Prefer to register online? Visit www.faifa.org/calendar)

Class	Member		Non-Member		Attend Y / N
	In advance	At The Door	In Advance	At The Door	
Ethics, Seniors and Suitability – Three Of A Kind	\$ 35	\$ 45	\$ 55	\$ 65	
LTC In America – 4 Hour NAIC Ongoing Training	\$ 45	\$ 55	\$ 65	\$ 75	
Save \$\$ - Register for Both Classes!	\$ 70		\$110		
TOTAL:					

Registrations must be postmarked or FAX'ed (credit cards only) no later than 3 days prior to class. After deadline, space availability on first-come, first-serve basis only. No cancellation refunds after 3 days prior to class. Please arrive 30 minutes before class starts. Those arriving after class starts will not receive credit. Registration Fees do not include any local association charges (if applicable).

Name: _____ Lic. #: _____

Address: _____ City: _____ State: _____ Zip: _____

Bus. Phone: _____ FAX: _____ E-mail: _____

If registering by check, must be mailed. Make checks payable to “NAIFA-Florida.” Mail registration and check to:
NAIFA-FL, 1836 Hermitage Blvd, Suite 200, Tallahassee, FL 32308

CREDIT CARD REGISTRATIONS — FAX or Mail – FAX # (850) 422-2762

MC VISA Account # --- 3-digit CVV Code

Expiration Date _____ Print Name As it Appears on card _____

Billing Address (for the credit card) _____

Signature _____ **OFFICE USE ONLY: Date Paid** _____ **Check #** _____