



The Florida Association of  
Insurance and Financial Advisors  
presents:



# “Agent Ethics For 2008/2009”

## JACKSONVILLE

Wednesday, January 28, 2009 (1:00 – 4:00 pm)

University Club of Jacksonville

1301 Riverplace Blvd, 27th Floor, Jacksonville, FL 32207

(904) 396 –1687

### 3-Hour Florida DFS-Approved Continuing Education Class\*

- ▶ All agents must have 3 hours on “Ethics” every two years
- ▶ This 3-hour class fulfills the requirement
- ▶ Ethical use of policy illustrations
- ▶ Business ethics and proper ethical behavior
- ▶ Ethical views on policy replacement

Review of the penalties associated with representing unauthorized entities

*[Intermediate level 3-hour Continuing Education (#63574) for all licensees (authority line 9908) including health and property/casualty and CSR's. This course meets the CE requirement for agents, pursuant to F.S. 626-2815.] Provider #654.*

**NOTE: THIS COURSE IS NOT FOR LIFE LICENSED AGENTS**

## “Agent Ethics For 2008/2009”

(Prefer to register online? Visit [www.faifa.org](http://www.faifa.org))

### REGISTRATION

**In Advance (7 days\*): Member \$35 (Non-member \$55) At the Door\*: Member \$45 (Non-member \$65)**

(\*Registrations must be postmarked or FAX'ed (credit cards only) no later than 7 days prior to class. After deadline, space availability on a first-come, first-serve basis only. No cancellation refunds after 7 days prior to class. Please plan to arrive 30 minutes before class starts. Those arriving after class starts will not receive credit. Registration Fees do not include charges for local association meals – please contact local association for reservations and payment information, if applicable.)

Name: \_\_\_\_\_ Lic. #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Bus. Phone: \_\_\_\_\_ FAX: \_\_\_\_\_ E-mail: \_\_\_\_\_

Member of FAIFA?  YES  NO If member, name of Local: \_\_\_\_\_

Site/City of Class You Wish to Attend: \_\_\_\_\_

(If registering by check, must be mailed. Please make checks payable to “FAIFA.” Must be postmarked no later than 7 days prior to class. Mail registration and check to: **FAIFA, 1836 Hermitage Blvd., Ste. 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 # \_\_\_\_\_