

Registrant Information

Please help us collect accurate attendee demographics by answering the following questions. This information is not required to process your registration.

What aspect of the AFS Annual Meeting motivated you to register? (Check all that apply)

- Educational Program
 CE Credits
 Past Attendee
 Networking
 Destination
 Community
 Exhibit Hall
 Chapter
 Other _____

Which of the following products do you recommend for your clients? (Check all that apply)

- Annuities
 Cable / communications
 Equipment Leasing
 Insurance
 Load Funds
 No-Load Funds
 Oil & Gas
 Real Estate
 Stocks/Bonds
 Tangibles
 Other _____

By what type of firm are you employed?

- Independent RIA
 Independent Broker-Dealer
 RIA Affiliated Broker-Dealer
 Regional / Local Brokerage
 National Wirehouse
 Academic Institution
 Insurance Company
 Bank
 Law Firm
 Accounting Firm
 Consulting
 Other _____

State Insurance

Will you be applying for state insurance CE credit for applicable sessions? (required for processing) Yes No

State in which you are licensed:

Note: at this time, FPA can only accommodate reporting for one state per attendee.

The states to which FPA is applying for state CE credit are:

Arizona, California, Colorado, Florida, Georgia, Illinois, Indiana, Iowa, Kansas, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Nevada, New Mexico, North Carolina, Ohio, Oregon, Pennsylvania, Texas, Virginia, Washington, and Wisconsin.

Name as it appears on your insurance license: _____

License number as it appears on your license: _____

NPN Number (as assigned by NAIC): _____

Conditions and Payment

All fees are in U.S. Dollars

Registration \$ _____
 Multimedia CD-ROM \$ _____
 Closing Night Reception \$ _____
 Companion Programs \$ _____

GRAND TOTAL \$ _____

- Check enclosed (made payable to FPA) / Check No. _____
 Visa
 MasterCard
 Discover
 American Express

Credit Card # _____
 Signature _____

Expiration Date _____
 Date _____

By my signature above, I hereby authorize FPA to debit my credit card for the total amount. I have read and understand the terms and conditions of this registration agreement. Dues, contributions or gifts to FPA are not deductible for federal income tax purposes, but they may be deductible as business expense.

SPECIAL SERVICES. Please check here if you have a disability or require special assistance. Attach a written description of your needs.

- I do not wish to have my photograph used in FPA promotional materials.
 I do not wish to have my name listed on the conference attendee roster.

CANCELLATION / REFUND POLICY: Cancellations must be made in writing. All refunds are based on U.S. Postmarked date of written request. Cancellations marked on or before September 18, 2009, to receive full refund, less \$100 processing fee; \$25 processing fee applies to companion program and special evening networking events.

No refunds will be given after September 18, 2009.

Submit Registration

Mail:
 Financial Planning Association
 4100 E. Mississippi Ave., 400
 Denver, CO 80246

Phone:
 800.322.4237 (U.S. / Canada)
 303.759.4900 (International)

Fax:
 303.759.0749