

Continuing Education *Registration Form*

- ♦ Please <u>print clearly</u> and submit your name <u>as it appears on your license</u> to avoid delays in processing.
- ♦ Registration forms cannot be used for CIC, CISR, ABEN, or CEU.com courses. These courses allow on-line registration only.

First Name:				
Last Name:				
License #:				
Job Title:	Principal/Owner	Office Manager	Producer	CSR
Agency Name:				
Business Address Line 1:				
Business Address Line 2:				
City:				
State:	Zip:	-		
Telephone:		Ext:		
Email:				

Course Title	Date	Taking Exam?	Fee
	/ /	Y N	\$
	/ /	Y N	\$
	/ /	Y N	\$
	/ /	Y N	\$
	/ /	Y N	\$

Return completed form and make checks payable to:

VIAA 600 Blair Park Road, Suite 100 Williston, VT 05495 **CANCELLATION POLICY:** To receive a full refund, VIAA must receive a cancellation request no later than three (3) days prior to the class and any study material must be returned. Requests received within the three (3) day period are subject to a 20% cancellation fee. "No Shows" forfeit the entire registration fee. VIAA reserves the right to cancel courses based on registration levels.

