CPIB Registration Form - Evening Class and Home Study

NAME: _____ **Date:** _____

HOME ADDRESS: _____

FIRM OR COMPANY NAME: _____

COMPANY ADDRESS: _____

TELEPHONE: **Bus:** _____ **FAX:** _____

Email: _____

COMPLETED COURSES: _____

Please check course you are registering for:

COURSE TITLE: **Law & Ethics** _____ **Advanced Personal Lines**_____

Claims Management & Adminstration_____ **Advanced Commercial Lines**____

Business Strategy for the Canadian Insurance Broker _____

EXAMS WRITTEN: **CPIB PROGRAM: May** _____ **December** _____

REWRITES: **CPIB PROGRAM: February** _____ **July** _____ **September** _____

MEMBER OF IBAN: YES _____ **NO** _____

Cheques should be made payable & forward to: *Insurance Brokers Association of NL*
151 Crosbie Road, St. John's, NL, A1B 4B4

CPIB:	**$675.00 + $87.75 (HST) = $762.75**	**– Members ☐**
	$860.00 + $111.80 (HST) = $971.80	**- Non-Members ☐**
	$120.00 + $15.60 (HST) = $135.60	**– Member Rewrite ☐**

Please add $10.00 for shipping outside St. John's

August 2010