

**REGISTRATION 2012**

**Certificate Series (12CS)**

**CUSTOMER INFORMATION (Please print clearly)**

Priority code **2CS W** Individual ID# or CEBS® ID# \_\_\_\_\_  
 First name \_\_\_\_\_ M.I. \_\_\_\_\_ Last name \_\_\_\_\_  
 Employer \_\_\_\_\_  
 Title \_\_\_\_\_  
 Address \_\_\_\_\_  Business  Home  
 City \_\_\_\_\_ State/Province \_\_\_\_\_ Country \_\_\_\_\_ ZIP/Postal code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Last 4/3 digits of SSN/SIN \_\_\_\_\_ Date of birth (mm/dd/yyyy) \_\_\_\_\_


See policies regarding registration/cancellation/refund/record retention/photo release and privacy at [www.ifebp.org/policies](http://www.ifebp.org/policies).

**NOT A MEMBER? JOIN NOW AND SAVE!**

Individual \$295\*  Organizational \$755\* Join now and pay the lower member rate.  
 \*Membership dues are reduced quarterly. Visit [www.ifebp.org/join](http://www.ifebp.org/join) for current rates.

**REGISTRATION INFORMATION**

Organization representing \_\_\_\_\_  
 Organization # \_\_\_\_\_  
 Badge name \_\_\_\_\_ Badge title \_\_\_\_\_  
 Special dietary requirements—specify \_\_\_\_\_  
 Form completed by \_\_\_\_\_ Phone \_\_\_\_\_

	Special assistance?
	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Certificate Series 2012**

**Two-Day Course Fee—Fee includes continental breakfast, lunch and course materials.**

**Separate fee required for each two-day course.**      **Early Fee**      **Late Fee** (applies within 45 days of course date)  
    Member    Nonmember    Member    Nonmember  
 2012 Course fee       \$970     \$1,120     \$1,170     \$1,320

**Earning a certificate requires completion of three two-day courses per track.**  
**Please indicate the course(s) for which you wish to register.**

Course Name	Dates	Mtg. #	Fees Enclosed

**Certificate in Global Benefits Management**—For details and to register, visit [www.ifebp.org/global](http://www.ifebp.org/global)

**Certificate in Canadian Benefit Plans**—For details and to register, visit [www.ifebp.org/canadacert](http://www.ifebp.org/canadacert)

**2012 CANCEL POLICY:** Early cancel fee is \$50/meeting day. Within 30 days of meeting, cancel fee is 50% of registration fee.

**CONTINUING EDUCATION CREDIT**

\$25 continuing education service charge due at time of registration (if applicable). The International Foundation will apply for CE credit based on requests. You must indicate the profession for which credit is requested.

Actuary     Attorney     CFA     CFP     CIMA     CPA     Insurance producer\*  
 PHR/SPHR/GPHR     Other, specify \_\_\_\_\_

Licensed in the state(s) of \_\_\_\_\_ License # \_\_\_\_\_

\*Preapproval of programs/seminars is required in ALL insurance states. This process can take up to 90 days.

Late requests could preclude insurance producers from earning credit.

\*NOTE: Requests made for CE credit on this form do not guarantee administration of credit.

**PAYMENT INFORMATION**


Full payment in U.S. funds must accompany order.  
 Make check payable to International Foundation.


Check # \_\_\_\_\_ \$ \_\_\_\_\_  
 VISA     MasterCard     Discover  
 American Express (U.S. only)  
 Credit card # \_\_\_\_\_  
 Exp. date \_\_\_\_\_  
 Cardholder's name (print) \_\_\_\_\_


**REGISTRATION/ORDER SUMMARY**

Membership fee \$ \_\_\_\_\_  
 Registration fee \$ \_\_\_\_\_  
 Registration fee \$ \_\_\_\_\_  
 Registration fee \$ \_\_\_\_\_  
 Continuing education fee (\$25) \$ \_\_\_\_\_  
**Total (U.S. funds) \$ \_\_\_\_\_**

 Register online at [www.ifebp.org](http://www.ifebp.org)

 Mail the registration form with check or credit card number to:  
 International Foundation—Conference  
 P.O. Box 689954, Chicago, IL 60695-9954

 Fax your registration with credit card number:  
 (262) 364-1818

 For information, e-mail [edreg@ifebp.org](mailto:edreg@ifebp.org), or phone toll free  
 (888) 334-3327, option 2, or (262) 786-6710, option 2