



IRI GLRC 2017

DOL IMPLEMENTATION POST-CONFERENCE WORKSHOP REGISTRATION FORM

June 14, 2017

Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Post-Conference Workshop	Registration Rate
<input type="checkbox"/> DOL Implementation Workshop	<input type="checkbox"/> \$295

Enclosed is my check (payable to the Insured Retirement Institute)

Please bill my credit card: Visa MasterCard American Express

Card # _____ Exp. Date _____ CVV _____

Name on credit card and billing address (include zip code) where you receive your credit card statement
(If different from above):

Signature: _____

Cancellation Policy

Cancellations must be sent in writing to IRI by fax or email to conferences@irionline.org. Requests received by March 5, 2016 will receive a full refund less a \$50 non-refundable processing fee. Cancellation requests received after March 6 and before May 5, 2016 will be issued a 50% refund less a \$50 non-refundable processing fee. No refunds will be issued after May 6, 2016.

Insured Retirement Institute
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Phone: (202) 469-3000 + Fax: (202) 469-3030 + www.myirionline.org



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2017

Substitution Policy

In the event the registrant is unable to attend, another person from the same company who is not already registered for the conference may be substituted without penalty. Please request a transfer by emailing conferences@irionline.org. Please provide the name of the attendee no longer able to attend along with contact information for the substitute attendee.