CAS 2018 RPM Seminar Registration Form – Three Ways to Register

March 19-21, 2018 • Fairmont Chicago Millenium Park • Chicago, IL

IF PAYING ONLINE For quick and convenient registration and payment, please visit:	OR	IF PAYING BY CREDIT CARD Complete this form and MAIL to: Casualty Actuarial Society 4350 N. Fairfax Drive, Suite 250	OR	IF PAYING BY CHECK Complete this form and send with check made payable to: Casualty Actuarial Society
www.casact.org/rpm		Arlington, VA 22203		PO Box 425
		OR fax to: (703) 276-3108		Merrifield, VA 22116-0425

If you fax in your registration with credit card information, please do not mail the original form as well—this may cause a duplicate charge to your credit card. All credit card payments will be processed in U.S. dollars.

1. Registration Information*

Name		
Badge Name (Name as it is to appear on badge)		
Company		
Address		
City	State	Zip
Telephone		
E-mail Address		

*This is not a change of address form. If you need to change your contact information listed with the CAS, please do so with the online change of address form, or call the CAS member resource center to update your record.

2. Seminar Registration Fees

Fees include any seminar materials, continental breakfasts, luncheon, refreshment breaks, and receptions. All registration fees listed are in U.S. currency.

Registration Fees	CAS Mem iCAS I	nber/CAS Member/S		•	Nonme	mber	Post-Event Session Recordings***
Received on or Before February 19		\$1025			\$122	25	
Received after February 19		\$1225			\$142	25	¢50
Government Employee		\$513			\$613 Waived		\$50
Moderator/Panelist		\$513					
Workshop Fees		Received b	y 2/19/18	3	Receiv	ved after	2/19/18
Attending the Seminar		\$725			\$825		••••••
Not attending the Seminar		\$925			\$1025		••••••
Workshop RPM Speaker Rate		Waived					
Workshop	#1	#2	#3	#4	#5	#6	#7

** An Active Candidate is a Non-CAS Member who has attempted at least one actuarial exam in the last two years. *** Post-Event Session Recordings are being made available to conference attendees at a discounted rate of \$50. Session recordings cover all or most of the sessions presented at the conference.

3. Method of Payment

$\hfill\square$ Check enclosed for the amoun	t \$			
Credit Card for the amount	\$			
(please check one):	Visa	Master Card	American Express	
				Cancellation Policy
Card Number			Expiration Date (MM/YY)	The fee will be refunded for
·_····				cancellations received by March
Cardholder's Name				12, 2018, less a \$100 processing
5-0				fee. Only written cancellations will
Billing Address				be honored. Cancellations will be
Signature				accepted by fax at (703) 276-3108
Neter Credit Court Deverse esta will a		-1 :6 6 4h	udin farma stirm in bland	or via e-mail to refund@casact.org.

Note: Credit Card Payments will not be processed if any of the credit card information is blank.

Registration fees for members of the CAS Academic Correspondent program and CAS academic members will be waived per the guidelines listed in the 2014 Yearbook and 2013 Proceedings.

4. Registrant Affiliations

General FCAS	
□ ACAS	
CAS Candidate	
CAS Subscriber	
CAS Affiliate	
AAA	
CCA	
□ AICPA	
Government Employee	
Academic Correspondent	
icas	
• Other	

5. Additional Information

- □ Check here if you do not want to receive mailings from exhibitors.
- Check here if you have any special requirements due to disability.
- Check here if you have any dietary restrictions and list here.