

Application for Subscriber Program



Enrollment as a Subscriber for 2023-2024 requires payment of \$725 U.S. funds and acceptance of the guidelines regarding activities at CAS meetings and CAS sponsored seminars.

Name _____
(Last) (First) (Initial)
Title _____
Company _____
Address _____
City _____ State _____ Country _____ Zip _____ (Postal Code) Business
Telephone _____ Facsimile _____ E-mail address _____

For access to protected sections of the CAS Web Site your username and password will be emailed to you once your application has been processed:

Application for Subscriber Program	
<i>Mail Form and Check to:</i> CAS P.O. Box 710425 Philadelphia, PA 61704	<p>Please indicate which card:</p> <p><input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AmEx</p> <p>Account _____ No.: _____</p> <p>Exp. Date: _____</p> <p>Cardholder's Name: _____</p> <p>Billing Address: _____</p> <p>Signature (Required) _____</p> <p>_____</p>

Meeting and Seminar Attendance Guidelines

Subscribers attending Casualty Actuarial Society meetings or CAS-sponsored seminars will not conduct activities at times which conflict in any way with the meeting program and activities, or interfere with individual members. Such activities include, but are not limited to, promotional events or efforts, marketing exhibitions, advertising, and open solicitation. Hospitality suites, while not authorized or endorsed by the CAS, are permitted provided they do not conflict with the meeting or seminar program.

Any failure to comply with these guidelines will be reviewed by the Board of Directors of the Casualty Actuarial Society.

I ACKNOWLEDGE THESE GUIDELINES AND AGREE TO COMPLY WITH THEM.

Signature

Date

To subscribe, please print this page, complete and sign this form and mail or fax with the prescribed annual subscriber fee to:

***Casualty Actuarial Society, Attn: Danelle Gee, 4350 N. Fairfax Drive, Suite 250, Arlington, VA 22203 ***
Telephone (703) 276-3100 * Fax (703) 276-3108