



**Insurance Training and Education Center, Inc.'s ~ 2017 Education Schedule**  
~ a subsidiary of the Independent Insurance Agents and Brokers of Arizona ~

## CRIS Commercial Auto, Surety, CIPs, and Miscellaneous Lines Seminar

This course reviews the various types of insurance often needed by contractors that are not covered in the other core courses. This includes auto liability and physical damage, professional liability, pollution liability, employment practices liability, and directors and officers liability insurance. It also provides a basic review of claims-made and occurrence coverage triggers, wrap-up or controlled insurance programs (CIPs), and surety bonds. Class time: 8 a.m. – 5:00 p.m.

**NOTE:** For an additional \$15, we will provide you with in-house lunch service.

**LOCATION:** ITEC Classroom (3<sup>rd</sup> St. & Flower St., N. of Thomas Rd.)  
333 East Flower Street  
Phoenix, AZ 85012  
(602) 956-1851

**DATE:** November 2, 2017  
**SPEAKER:** Kevin Norton, CPCU  
**TIME:** 8:00 am – 5:00 pm  
**COST:** \$195.00 for members \$220.00 for non-members  
Add \$15 for in-house lunch service (optional)

*This course is approved for 8  
hours of Arizona Continuing  
Education Credit.*

**Please Note:** All participants must present photo identification to the on-site registrar at the course.

☐ Mr. ☐ Ms. ☐ Mrs. Arizona Insurance License #: \_\_\_\_\_  
Preferred Name for Badge: \_\_\_\_\_

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name: \_\_\_\_\_

Are you taking this seminar for C.E. credit? Designations: \_\_\_\_\_  
☐ YES ☐ NO Date of Birth: \_\_\_\_\_

Agency/Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Method of Payment:** ☐ Check: made payable to ITEC Receipt? ☐ YES ☐ NO  
☐ Credit Card:

Amount: ☐ \$ 195.00 member price or ☐ \$ 220.00 non-member price ☐ VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS  
Add ☐ \$ 15.00 optional in-house lunch service Credit Card Security Code: \_\_\_\_\_

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_ Cardholder's Signature: \_\_\_\_\_  
↑ Please Print! ↑

Credit card billing address (Please include zip code): \_\_\_\_\_  
↑ Same address as above? Please circle YES or NO ↑

**CANCELLATION POLICY:** Full refund if written notification is received seven (7) business days prior to the seminar. Cancellations received after that date will incur a \$50 non-transferable fee. No shows forfeit full registration fees. ITEC reserves the right to cancel or reschedule this event.