



Insurance Training and Education Center, Inc.'s ~ 2019 Education Schedule
~ a subsidiary of the Independent Insurance Agents and Brokers of Arizona ~

CRIS Contractual Risk Transfer in Construction Seminar

This course reviews the ways in which risk is allocated in construction contracts. In addition to a technical review of the types of techniques available, this course examines strategies for maximizing the effectiveness of risk transfers in construction contracts. Topics include indemnification provisions, waivers of subrogation, limitation of liability, insurance requirements, and some of the key areas of risk allocation in standard construction contracts. Tips for writing and negotiating fair and effective insurance requirements are provided where appropriate, as well as for verifying compliance with these requirements. Class time: 8 a.m. – 5:00 p.m. **NOTE:** For an additional \$15, we will provide you with in-house lunch service.

DATE: April 25, 2019
SPEAKER: Lynne Lovell, CIC, CRM, CLU, ChFC, ARM, RHU, CPCU, ASLI, AFSB, MLIS, AINS, CRIS
COST: \$195.00 for members \$220.00 for non-members
Add \$15 for in-house lunch service (optional)

LOCATION: ITEC Classroom
333 East Flower Street
Phoenix, AZ 85012
(602) 956-1851
TIME: 8:00 am – 5:00 pm

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. Preferred Name for Badge: _____ Arizona Insurance License #: _____

First Name: _____ M.I. _____ Last Name: _____

Are you taking this seminar for C.E. credit? YES NO
Designations: _____
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): _____
↑If credit card billing address is the same as the above address, listed, write SAME↑

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.